



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

# **2024 Annual Progress & Services Report**

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**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## I. General Information

### A. State Agency Administering the Plan

The Texas child welfare system began with the Child Welfare Division, created by the Texas Legislature in 1931 as a program within the Texas Board of Control. During the following decades, federal, state, and county participation in services to abused and neglected children gradually increased. The Texas Family Code, created in 1974, gave the Texas Department of Public Welfare more responsibility for services to abused, neglected, truant, and runaway children. Under the code, the failure to report suspected abuse or neglect of children became a misdemeanor offense.

In 1987, the Texas Legislature enacted statutory definitions of child abuse and child neglect. The definitions were incorporated into the Texas Family Code, amended with subsequent state legislative enactment of law, and serve to identify the jurisdiction for the agency's involvement with families. In 1992, the Texas Legislature formed a new agency, the Texas Department of Protective and Regulatory Services. Child Protective Services (CPS), along with Adult Protective Services (APS) and Child Care Licensing (CCL), became major programs within this new agency. Texas Department of Protective and Regulatory Services was later renamed the Texas Department of Family and Protective Services (DFPS).

Effective in September 2017, the Texas Legislature transformed DFPS into an independent state agency and DFPS reports directly to the Governor. Simultaneously, the agency immediately reorganized one of its core functions by moving all investigative functions from the CPS program into the new Child Protective Investigations (CPI) program. The CPI program includes former CPS investigators and special investigators, as well as investigators from the CCL program who investigate allegations of abuse and neglect in day care and foster care. The regulatory functions of the CCL program as well as the APS Provider Investigations program were transferred from DFPS to the Health and Human Services Commission (HHSC). The CPI program at DFPS and the Licensing and Regulatory Division at HHSC continue to work together closely to protect the children they jointly serve.

While CPI continues to work closely with both CPS and CCL, the structure allows for improved quality and effectiveness of child abuse and neglect investigations. It further allows CPS to focus on its core functions of child safety, permanency, well-being, and normalcy.

DFPS works with communities to promote safe and healthy families and protect children and vulnerable adults from abuse, neglect, and exploitation. This is done through investigations, services and referrals, and prevention programs.

DFPS does this important work through its five major programs:

- Statewide Intake;
- Adult Protective Services;
- Child Protective Investigations;
- Child Protective Services; and

- Prevention and Early Intervention.

The DFPS commissioner oversees more than 12,000 employees in 316 local offices located in 11 regions and a state headquarters in Austin. More about the agency is available at its public website: <https://www.dfps.texas.gov>.

DFPS is the designated agency to administer Title IV-B, subparts 1 and 2, CAPTA Title I, and Title IV-E programs in Texas. DFPS is the single agency designated by the Governor of Texas and by state statute that has the authority to administer child protective services consistent with the Texas Family Code, Section [264.007](#) and the Texas Human Resource Code, Section [40.002](#).

Organizational charts for the Department of Family and Protective Services and Child Protective Services are provided at the end of this document. The most current approved Title IV-B Child and Family Services Plan can be found at:

[https://www.dfps.texas.gov/About\\_DFPS/Title\\_IV-B\\_State\\_Plan/](https://www.dfps.texas.gov/About_DFPS/Title_IV-B_State_Plan/)

**Note:** Liz Kromrei LCSW, Director of Services-Child Protective Services, is the state point of contact for the 2024 APSR. Phone Number: (512) 289-7816

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# 2024 Title IV–B Annual Progress and Services Report

## I. General Information

### B. Mission, Vision and Values Statement

- *Description of how the state has engaged and will continue to engage in substantial, ongoing, and meaningful collaboration with stakeholders, tribes, and courts in the development and implementation of the 2020-2024 CFSP.*

The Texas Department of Family and Protective Services developed the following DFPS Mission, Vision, and Values to guide the Texas child welfare system:

#### **DFPS Mission**

*We promote safe and healthy families and protect children and vulnerable adults from abuse, neglect, and exploitation.*

#### **DFPS Vision**

*Improving the lives of those we serve.*

#### **DFPS Values**

- **Accountable:** We act with a sense of urgency to deliver results in an accountable, ethical, and transparent manner.
- **Respectful:** We recognize the value of each person and act timely, value privacy, and treat all with respect.
- **Diverse:** We promote diversity, inclusion, and equality by honoring individual differences.
- **Collaborative:** Whether through our staff or contractors, we work in partnership with clients, families, and communities to ensure our mutual success.
- **Professional:** We value our staff and strive for excellence while being professional, passionate, and innovative.

#### **Guiding Principles**

- We are accountable to the children, youth, families, and communities we serve.
- We believe the voices of children, youth, and families are integral to informing and transforming the system.
- We believe all children, youth, and families should be treated with dignity and respect.
- We believe children, youth, and families deserve to be mentally, emotionally, and physically safe as well as cared for in settings that permit them to develop, thrive, and heal.
- We believe the inherent value of children, youth, and families' connections to family should be respected, and children should ideally be cared for by family.
- We believe in equitable treatment for children, youth, and families.
- We believe we must understand how our work impacts children, youth, and families to identify the existing opportunities, barriers, and challenges.

- We believe in using data and other evidence to inform our decisions and adjust for continued quality improvement.

A number of the divisions within the agency have developed divisional mission, vision, and value statements which are tailored to the division's area of responsibility but maintain consistency with the agency's overarching direction.

Consistent with the above Mission, Vision, Values and Guiding Principles, DFPS engages in substantial, ongoing, and meaningful collaboration with stakeholders, tribes, and courts in the development and implementation of the 2020-2024 CFSP in a variety of ways. As Texas is a large and diverse state, the agency makes every effort to use available tools for communicating with stakeholders about the delivery of services, outcomes, and opportunities to improve the Texas child welfare system. Although not limited to the list below, the following are examples of mechanisms used to engage internal or external stakeholders, tribes, and courts:

**Social Media:** DFPS uses Facebook, Twitter, and email to update stakeholders and solicit input regarding new programs or changes. DFPS encourages subscription to email notifications for ongoing input, providing the opportunity to subscribe whenever an individual opens the agency web page. For example, as DFPS discusses the impact of the federal Family First Act, an email subscriber list shares information regularly. Dedicated email accounts are used to get input, provide an opportunity for questions, and share a chance to give individualized input.

**Agency Website:** The agency has a significant, well-maintained agency website that shares detailed information about DFPS programs and services. The Office of Data and Systems Improvement (ODSI) has done several advancements to make the information that DFPS collects and generates easy to access and provides greater insights regarding all programs. The ODSI division has developed a Child Protective Services (CPS) dashboard that provides real time analytics year over year on various indicators and metrics, additionally most of the data is visualized via Tableau, and the division develops an interactive data book that goes in depth on a various metrics and key performance indicators (KPIs). Additionally, the division posts online in the Data and Metrics public website, Child and Family Service Plans, as well as Annual Progress and Services Reports, including other detailed published reports, and presentations. The agency also provides public notification and solicits input regarding programs, policy, and protocol on the website, and provides most of the agency data for analysis via Texas Open Data Portal.

**Webinars and Public Hearings:** On a regular basis, topical webinars (with opportunity for live questions and commentary) are presented. Public forums provide an opportunity for questions and comments to be directly provided. Webinars and Public Hearings are recorded and posted.

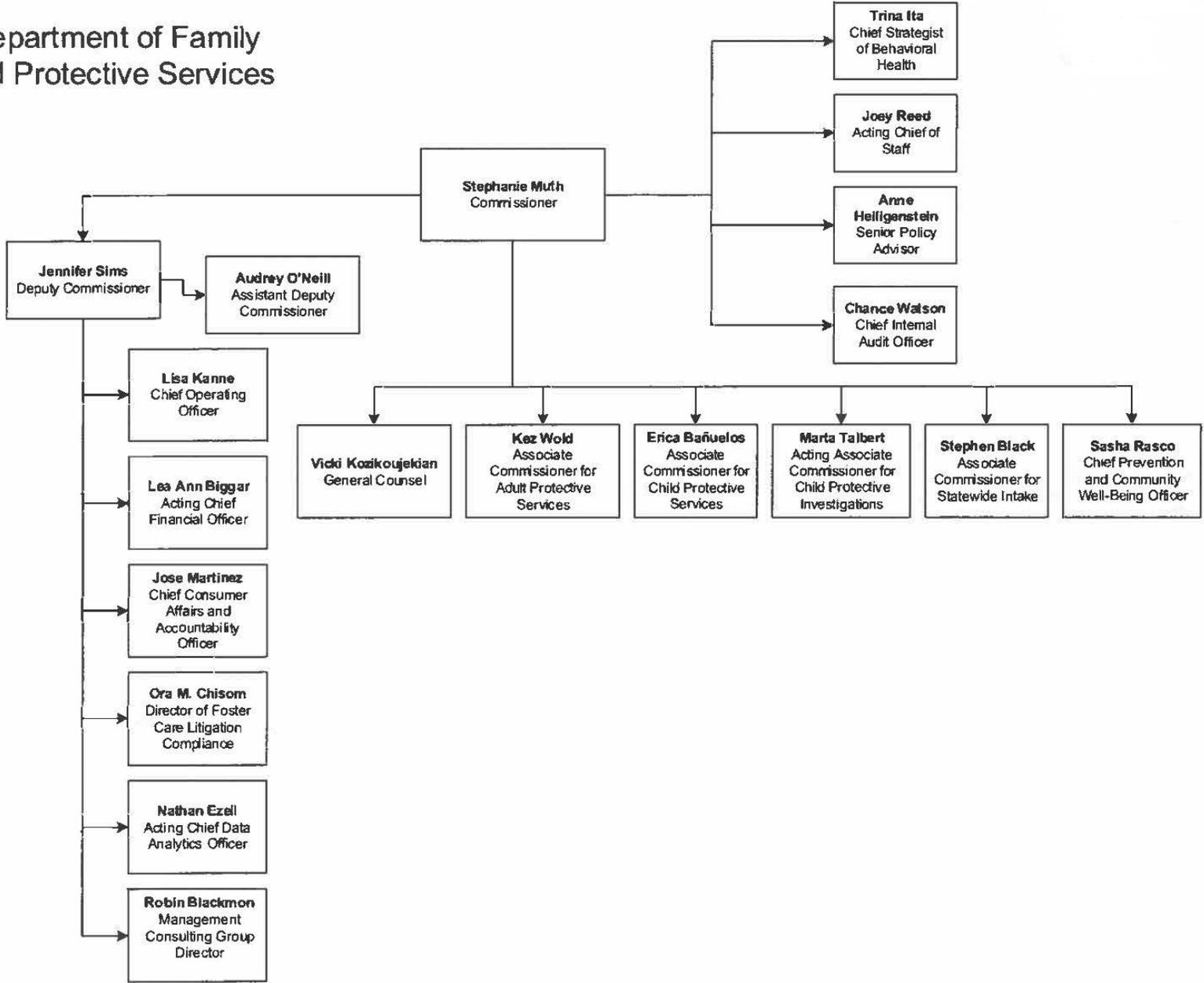
**Advisory Groups:** These groups provide an opportunity for public comment. Meetings, such as the DFPS Council Meetings, are livestreamed.

**Legislative Hearings, Reports, and Meetings:** DFPS staff provide information to elected officials in a variety of venues. These settings often involve stakeholders who provide input and recommendations, express concerns, or share experiences on services provided by the Texas child welfare system.

**Workgroups, Committees, Commissions, and other Stakeholder Group Settings:** DFPS leadership at a statewide level, as well as regional and county levels, participate in a variety of workgroups that are focused on improving the child welfare system. The entities can include:

- Large, system-wide groups such as the Children’s Commission (with the Court Improvement Project, Office of Court Administration, and courts involved) or Statewide Behavioral Health Advisory Committee (with behavioral health stakeholders involved);
- Groups focused on specific topical areas, such as the STAR Health Joint Team Meeting or the Committee on Advancing Residential Practices; or
- Groups focused on needs of a specific population, such as the DFPS/Tribal meetings.
- Groups involving Children, Youth, or Families: Groups that emphasize individuals with lived experiences and who have received services provide an opportunity for input and recommendations. Examples include the Statewide Youth Leadership Council (that has a “Fish Bowl” exercise, in which youth representing all regions provide direct input to the Texas child welfare director), Kinship Caregiver groups, Parent Collaboration Groups, Foster Parent Associations, and Fatherhood groups.
- Formal Advisory Committees: Particularly during implementation of new programs, Statewide or Regional Advisory Committees are utilized to guide the process by, monitoring roll outs, soliciting input on the process, assessing the program, and making recommendations for next steps.
- Formal solicitation of input through posting of Requests for Information when soliciting a major procurement, such as during the Community- Based Care implementation process or prior to presenting a new Request for Proposal when it is a new or significantly altered solicitation.

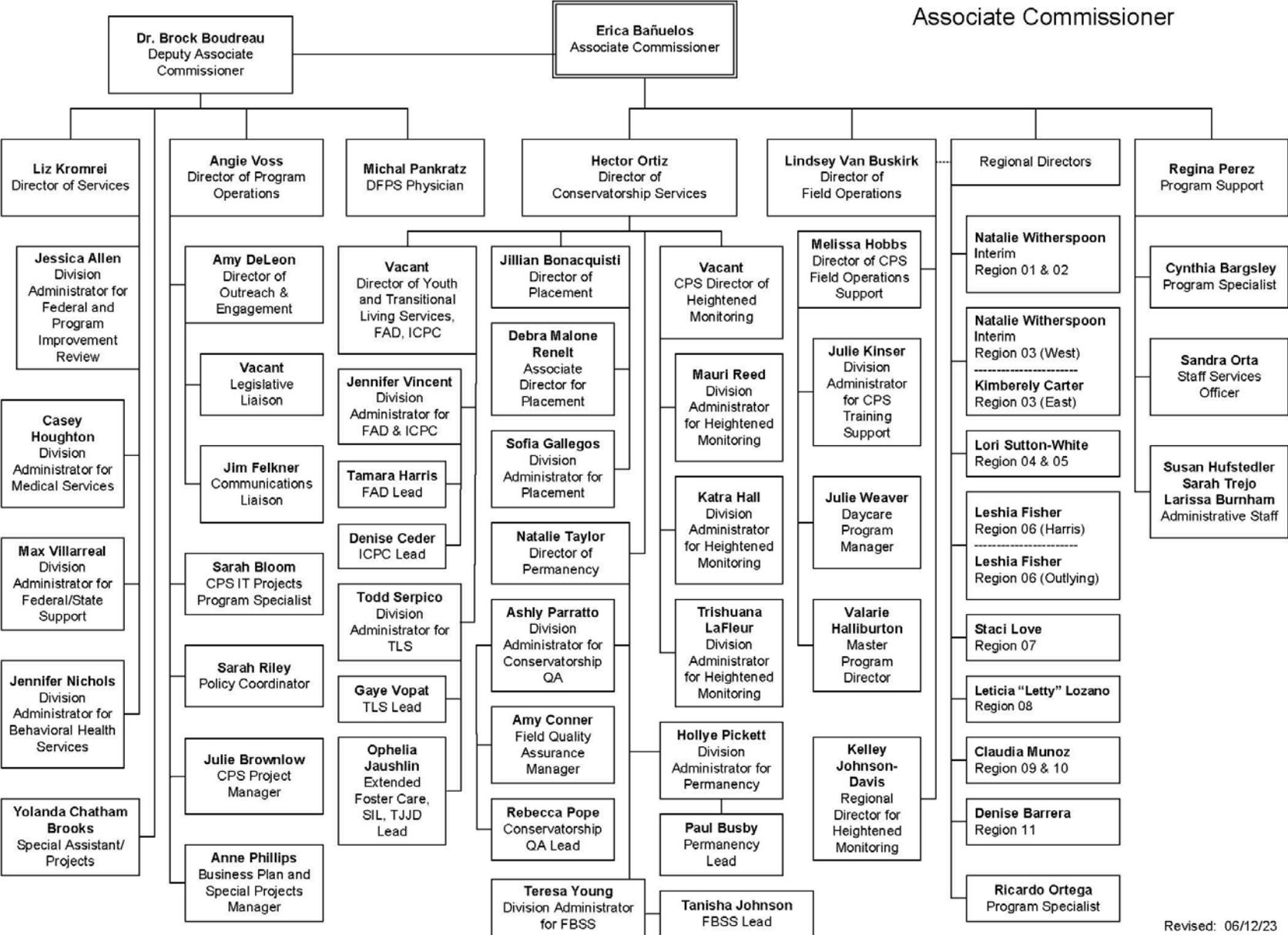
# Department of Family and Protective Services



Revised 5/1/23

# Child Protective Services

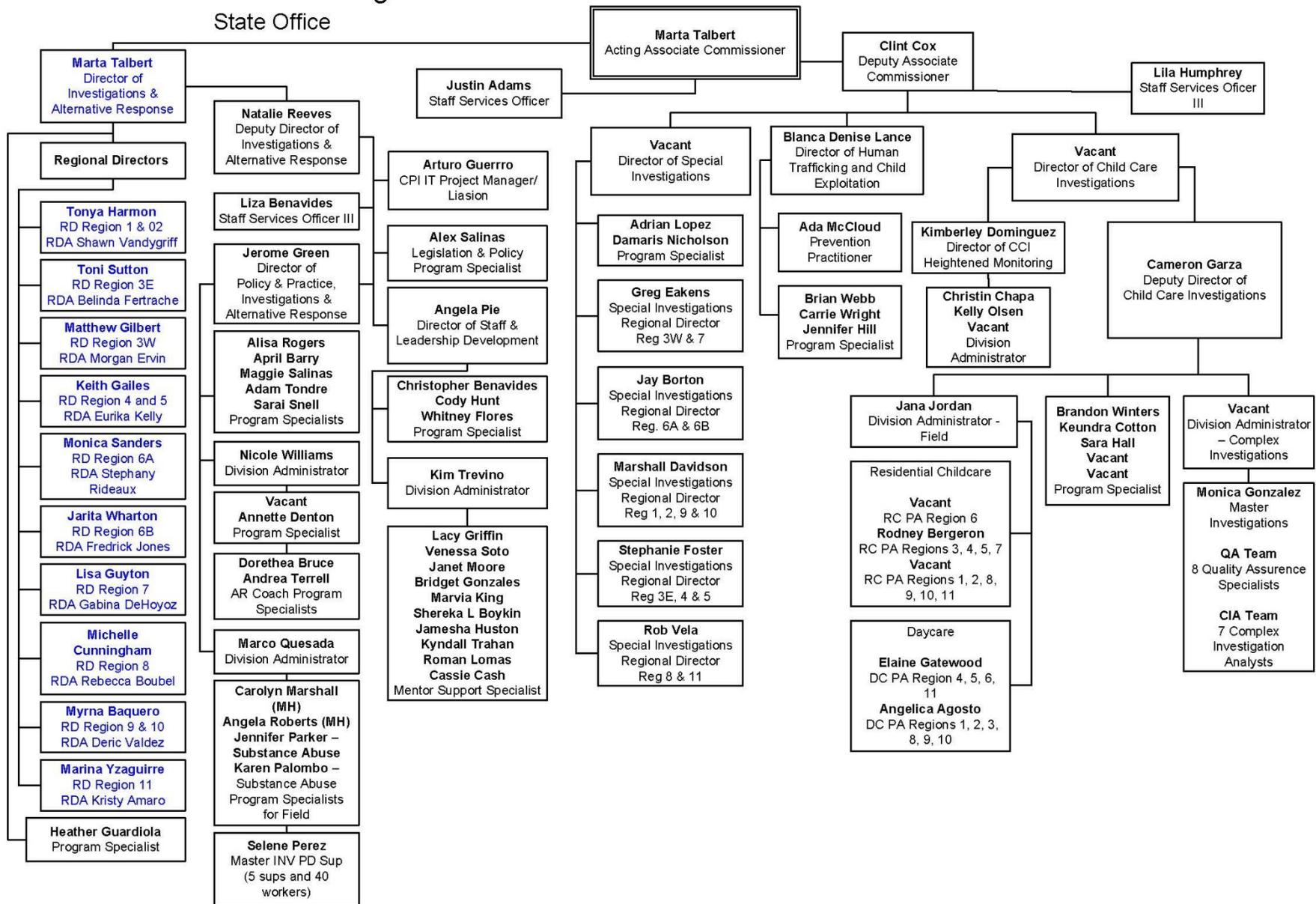
## Associate Commissioner



Revised: 06/12/23

# Child Protective Investigations

## State Office



Revised 4/25/23



**TEXAS**  
Department of Family  
and Protective Services

**The State of Texas**

# **2024 Annual Progress & Services Report**

## **Section II. Collaboration**

**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## II. Collaboration

- *Provide an update on how the state agency has engaged in substantial, ongoing, and meaningful consultation and collaboration with families, children, youth, Tribes, and other system partners in the implementation of the 2020-2024 CFSP and subsequent APSRs.*
- *Provide information on how the agency ensured that the engaged communities represented the racial diversity of the families and youth/young adults being served and how the state included those who have been historically underserved or marginalized, and those adversely affected by persistent poverty and inequality in the child welfare system.*

*Examples of system partners include: frontline workers, the CBCAP lead agency and other prevention partners, such as Children’s Trust Funds; the CJA grantee, service providers, faith-based and community organizations; kinship navigator programs; and representatives of state and local agencies administering other federal or federally assisted programs serving children and families, such as Head Start, child care, Temporary Assistance for Needy Families (TANF) and state and local education agencies.*

- *Provide an update on how the state agency has demonstrated substantial, meaningful, and ongoing collaboration with state courts and members of the legal and judicial communities, including the CIP, in the development and implementation of the CFSP/APSR and, if applicable, any active state CFSR PIP or title IV-E PIP.*

### **Collaboration**

Building community relationships and partnerships is an integral part of the Texas Department of Family and Protective Services (DFPS) work and is critical to providing clients with needed support. DFPS continues to utilize all available community support to provide for the safety, well-being, and permanency of Texas children and help ensure the successful implementation of the goals, objectives, and strategies listed in the 2020-24 Child and Family Services Plan (CFSP). The 2020-24 CFSP lists specific strategies employed to actively seek collaboration and support for the successful CFSP implementation within the 2020-24 timeframe. The agency's ongoing efforts to work toward implementing and completing the 2020-24 CFSP goals and activities, assessing outcomes, and developing strategic plans to increase the safety, permanency, and well-being of children in the child welfare system will continue in the collaborative efforts identified in the CFSP, as well as other such collaborative activities noted below.

### **Collaboration with Community Resources**

Child Protective Services (CPS) has worked diligently to build and strengthen alliances and networks at the local level. CPS continues to build sustainable community partnerships by using the following strategies:

- Entering into agreements to the extent possible and feasible for the establishment of joint offices or workplaces with local officials and organizations, including:
  - ▶ Children's advocacy centers;
  - ▶ Law enforcement officials;
  - ▶ Prosecutors;
  - ▶ Health care providers; and
  - ▶ Domestic violence shelters.
- Employing specialized staff to the extent funds are appropriated for that purpose, to serve as:
  - ▶ Local community initiative specialists in each region who focus on building community alliances and networks including:
    - ▶ Education specialists;
    - ▶ Disability specialists;
    - ▶ Nurse consultants and well-being specialists;
    - ▶ Substance use specialists; and
    - ▶ Behavioral and mental health specialists.
- Strengthening the memorandum of understanding (MOU) and contracting development procedures to ensure both financial and non-financial agreements with community entities have the required elements to ensure:
  - ▶ Accountability;
  - ▶ Continuity of operations when board members and operational staff and volunteers change over time;
  - ▶ Flexibility in order to accommodate policy and funding changes; and
  - ▶ Regular review to ensure the MOU or contract elements are current and achievable.
- Improving communication with stakeholders by:
  - ▶ Proactively releasing information on the agency's public website;
  - ▶ Effectively using social media platforms to communicate quickly and directly regarding current events and activities;
  - ▶ Regularly visiting with stakeholder groups;
  - ▶ Developing public education campaigns;
  - ▶ Improving responsiveness to inquiries; and
  - ▶ Providing many ways for stakeholders to influence rulemaking and policy, including:
    - ◇ Participation in workgroups and stakeholder forums;
    - ◇ Joining regional advisory groups; and
    - ◇ Submitting public comments via the *Texas Register*.

DFPS uses different mechanisms to communicate about the delivery of services, outcomes, and opportunities to improve the Texas child welfare system. The following are a few examples of mechanisms that are and will continue to be regularly used to engage internal or external stakeholders, tribes, and courts:

- Social media;
- Agency website;
- Webinars and public hearings;
- Advisory groups;
- Legislative hearings, reports, and meetings;
- Workgroups, committees, commissions, and other stakeholder group settings:

- ▶ Large, system-wide groups;
- ▶ Groups focused on specific topical areas; and
- ▶ Groups focused on needs of a specific population or geographic area;
- Groups involving children, youth, or families.
- Formal committees; and
- Formal solicitation of input.

### **State Interagency Team (DFPS/HHSC)**

DFPS and the Texas Health and Human Services Commission (HHSC) jointly presented a behavioral health plan as part of the agencies' continuing commitment to working together and improving the health, safety, and well-being of children in the Texas foster care system.

DFPS and HHSC issued joint guiding principles in 2022, to express the agencies' shared values and principles to eliminate the problem of children in DFPS conservatorship who lack a safe, appropriate placement. Specifically, the guiding principles are intended to guide the work of the DFPS-HHSC State Interagency Team (Interagency Team) and were developed collaboratively through facilitated discussion with leadership from both agencies.

### **Guiding Principles**

- We are accountable to the children, youth, families, and communities we serve.
- We believe the voices of children, youth, and families are integral to informing and transforming the system.
- We believe all children, youth, and families should be treated with dignity and respect.
- We believe children, youth, and families deserve to be mentally, emotionally, and physically safe as well as cared for in settings that permit them to develop, thrive, and heal.
- We believe the inherent value of children, youth, and families' connections to family should be respected, and children should ideally be cared for by family.
- We believe in equitable treatment for children, youth, and families.
- We believe we must understand how our work impacts children, youth, and families to identify the existing opportunities, barriers, and challenges.
- We believe in using data and other evidence to inform our decisions and adjust for continued quality improvement.

The Interagency Team began in 2022 and continues to meet on an as needed basis. Selected by their respective agency commissioners, the team members are senior leaders within their organizations and experts in their fields. The team is led by DFPS to provide leadership and strategic coordination and is accountable for the mitigation and prevention of children being placed in DFPS without placement status. HHSC's members include representation from all areas of the agency that intersect with the children in DFPS conservatorship lacking placement issue, including Medicaid/CHIP, Behavioral Health Services, and Child Care Regulation. DFPS' membership represents executives who can make timely decisions and have relationships with community partners that enable prompt

placement of children in DFPS conservatorship. As such, they are equipped with the knowledge and authority to act quickly. The Interagency Team will meet regularly to collaborate on known and emerging priorities.

Also included on the Interagency Team are clinical coordinator and community liaison positions meant to help focus efforts related to children without placement, bridge the interagency gap in coordination and collaboration at the regional level and serve as the DFPS point of contact on the HHSC Community Resource Coordination Groups.

### **Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families**

The Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families' (Children's Commission) mission is to strengthen courts for children, youth, and families in the Texas child protection system, and thereby, improve the safety, permanency, and well-being of children. The Children's Commission exists to strengthen the judicial handling of child welfare cases systemically through improvements in technology, attorney and judicial training, and court improvement projects. It has no authority over state agencies or their operational details and does not discuss or consider specific, active cases.

The Children's Commission administers the federal Court Improvement Program for Texas and is composed of an executive level group of judges, CPS and other DFPS officials, non-profit foundations, State Bar leaders, private attorneys, legislators, parents, and tribal and mental health representatives. There are four standing committees: Systems Improvement; Legal Practice & Process; Data; and Training. Ad-hoc committees focus on discreet issues such as supporting youth who are involved in both the juvenile justice and child welfare systems.

The Children's Commission seeks information about systemic challenges and strengths and links to the larger stakeholder community through the approximately 40-member Collaborative Council, whose members include young adults formerly in foster care, foster families, attorneys, Court Appointed Special Advocates (CASA), and parent advocates. Representatives from the juvenile justice, mental health, and education systems are also included, as well as representatives from the private provider community, children's advocacy centers, and many other child protection and child and family advocacy groups. The Honorable Rob Hoffman, Mason County state district judge and senior jurist in residence for the Children's Commission, assists with judicial leadership initiatives, attorney and judicial training, legislative and policy matters, and jurist in residence letters. The Honorable Piper McCraw, Collin County state district judge, also advises the Children's Commission as jurist in residence. The Children's Commission's inclusive, collaborative structure and broad, high-level membership generates, energizes, and enhances visibility of the state's court improvement efforts and helps facilitate collaboration among high level child welfare stakeholders throughout the state.

Texas has a strong record of ongoing interagency child welfare collaboration. The Children's Commission and DFPS work together toward developing and achieving shared

goals and activities detailed in the Children's Commission Strategic Plan. Also, the Children's Commission is actively involved in child welfare strategic planning and program development, working closely with DFPS on federal requirements, such as the Child and Family Services Review Program Improvement Plan and annual Title IV-B state planning and reporting.

DFPS and the Children's Commission review policy and procedures, share data and case analysis information, and explore opportunities to sponsor joint training activities, as well as round table discussions. Both the Children's Commission and DFPS participate on bi-weekly collaborative stakeholder calls and work multiple levels of the child welfare system across many regions of the state. The collaboration is dynamic and adjusted as necessary. DFPS and the Children's Commission continuously collaborate on key topics related to safety, permanency, and well-being.

The Children's Commission collaborates with DFPS on almost every aspect of its work. A few examples of collaboration between DFPS and the Children's Commission are described below:

- Active Children's Commission membership includes the DFPS CPS and Prevention and Early Intervention (PEI) associate commissioners, several staff on the Commission's Collaborative Council, and at least one state level DFPS staff member on every Children's Commission committee.
- The Children's Commission, the Texas Education Agency, and DFPS continue to collaborate on numerous issues related to foster care and education for children and youth experiencing foster care.
- DFPS, the Children's Commission, and a variety of stakeholders have sustained robust participation on the Statewide Collaborative on Trauma Informed Care, following the recommended strategies in the 2019 report *Building a Trauma-Informed Child Welfare System: A Blueprint*. The first of its kind in the nation, the *Trauma Blueprint* is a roadmap to transforming the Texas child welfare system into one that routinely and consistently provides trauma-informed care to children and families.
- The Children's Commission hosts a bi-weekly collaborative conference call with child welfare stakeholders, including executive staff of CPS, Office of Court Administration, CASA, and many other stakeholders.
- DFPS and the Children's Commission review policies and procedures, share data and case analysis information, and explore opportunities to sponsor joint training activities and projects.
- The Children's Commission's executive director serves on the Texas Child and Family Services Review (CFSR) Planning Team mobilized for preparation regarding the Texas CFSR Round 4. The executive director also serves as a member of the Public Private Partnership, the steering committee advising DFPS on the rollout of community-based care.
- The Children's Commission recently created a grant-funded data analyst position in partnership with the Office of Court Administration and DFPS. The analyst uses publicly available DFPS and court data to strengthen the court's continuous quality improvement process in CPS cases.
- The Children's Commission partners with DFPS on priority issues every year, typically

organized around roundtable meetings. These discussions include experts from around Texas with a focus on identifying barriers and solutions to complex problems.

- At each annual conference for child welfare judges hosted by the Children's Commission and the Texas Center for the Judiciary, DFPS presents information on the high-level trends in data across Texas. Regional directors then facilitate small group meetings with additional data to inform judges of local trends in need of attention. DFPS staff often participate in conference sessions on topics of interest or impacting the judiciary.
- The Children's Commission continues to provide funding for annual DFPS attorney training, as well as scholarships to various CPS related trainings. The Children's Commission and DFPS also collaborate on Trial Skills Training which occurs each year.
- The Children's Commission also maintains relationships with the three federally recognized tribes and seeks to include the tribes in projects, meetings, and decisions with statewide importance.

### **Texas Faith-Based Model**

The DFPS Faith-Based and Community Engagement Division engages faith-based, community partners and people to assist vulnerable children, adults, and families served by DFPS. The Faith-Based and Community Engagement Division's goals and strategies fall into five overarching objectives:

1. Foster key partnerships;
2. Promote community awareness;
3. Strengthen volunteer and intern engagement;
4. Effectively manage resources; and
5. Develop and maintain the faith-based and community engagement workforce.

The Faith-Based and Community Engagement Division works collaboratively with all DFPS program divisions to maximize resources and leverage valuable relationships available to the state to best meet the needs of Texans who are most at risk of abuse and neglect. Some of the current partnerships and initiatives in place are with:

- Care Portal, a web-based tool that allows DFPS staff to connect with faith communities to clearly identify and meet the needs of children and families (<https://www.careportal.org/>);
- Volunteers and interns to benefit clients and families and encourages faith-based and community partners to participate in prevention and education activities around child welfare (<https://www.dfps.texas.gov/Community/volunteer/>);
- The Office of the Texas Governor on faith-based strategies to address child sex trafficking in Texas which includes inviting all faith communities to join in a day of prayer <https://gov.texas.gov/organization/cjd/cstt-grace; and>

Texas Interagency Coordinating Group established by the 81st Texas Legislature in 2009 to advance partnerships between state agencies and local faith-based and community organizations (<https://onestarfoundation.org/icg/>).

### **Community-Based Care**

Since 2010, DFPS has engaged in an effort to redesign the foster care system to expand the role of community providers to take responsibility for placement services, capacity/network development, community engagement, and service delivery and coordination for children in foster care and their families under single source continuum contracts. In 2017, the 85th Texas Legislature directed DFPS to begin purchasing case management and services to children in DFPS conservatorship, their families, and relative/kinship placements from Single Source Continuum Contractors (SSCCs). This model is known as community-based care. Senate Bill 1896, 87th Texas Legislative, Regular Session, 2021, created the Office of Community-Based Care Transition (OCBCT) as an independent office administratively attached to DFPS. The director is appointed by and reports to the Governor.

Stakeholder involvement is paramount to the development and success of this redesigned foster care system in Texas. The project team has ensured comprehensive and extensive stakeholder involvement throughout community-based care implementation with a Public Private Partnership advisory council. The Partnership is a collaborative endeavor among DFPS staff, former foster youth, parent partners, private providers, advocates, trade associations, and judges which continues to serve as the guiding body on community-based care recommendations.

OCBCT collaborates with DFPS on communications for all internal and external stakeholders regarding community-based care implementation. DFPS and OCBCT maintain a public webpage to serve as a general communication venue for timely project updates and notices, such as the formal community-based care implementation plan and other legislatively required progress reports, as well as content of interest to DFPS staff and stakeholders affected by community-based care. The webpage includes implementation status updates for each community-based care area and posting of frequently asked questions to answer CPS staff and other stakeholders' questions. Additional communication activities found on the community-based care webpage include:

- Community outreach updates, including town halls for staff, community partners, and the judiciary;
- SSCC information and links to each SSCC's website;
- OCBCT information, including organizational chart and mission; and
- DFPS trainings and general cross-divisional presentations to ensure staff understanding of the community-based care model and status of implementation.

OCBCT meets regularly with SSCCs and DFPS to evaluate community-based care implementation and post-implementation gaps for ongoing process improvement through regional implementation calls, post-transition surveys, and meetings. In addition, community based-care administrators serve as liaisons between DFPS and the SSCC, providing support and facilitating communication and collaboration.

### **Disproportionality**

DFPS is committed to continually addressing disproportionality in the Texas child welfare system to ensure all children and families are afforded equitable opportunities for positive

outcomes. DFPS has a responsibility to mitigate disparity in all phases of child welfare services delivery by:

- Delivering cultural humility training to all DFPS service delivery staff, as well as community and external stakeholders;
- Analyzing and sharing data related to outcomes at key decision-making points; and
- Developing partnerships with community groups to provide culturally responsive services to children and families.

Partnerships with communities to address the problem of disproportionality exist statewide. Some regions have convened local community advisory committees with participating parents and youth alumni. Currently three committees are active: one statewide committee and two local committees in Dallas and Travis counties. In addition, DFPS fosters numerous partnerships with external stakeholders and local communities. The work of these committees and partnerships is crucial to improving the Texas child welfare system, strengthening its services, and eliminating disproportionality and disparities.

### **Parent Collaboration Group**

The statewide Parent Collaboration Group is a DFPS advisory committee which provides a forum for parents involved with the child welfare system and have “lived experiences” to share their experiences and make recommendations for improvement that assists in the analysis of current policies and the evaluation of service delivery strategies. The Parent Collaboration Group provides a mechanism to include biological parents in the design, implementation, and evaluation of the CPS program.

Each region has one or more parent representatives, known as parent liaisons, and a CPS representative in the Parent Collaboration Group. Regions 01, 02, 03E, 04, 05, 06A, 07, 08, and 10 currently have parent liaisons, and DFPS has plans to fill the vacancies in other regions to strengthen the parent voice and increase parent participation in regional parent support groups. The CPS parent program specialist serves as a liaison to the Parent Collaboration Group. A web page on the DFPS website is dedicated to the Parent Collaboration Group initiative. Additionally, the CPS parent program specialist is a member of the Children’s Commission Collaborative Council, and a regional parent liaison serves as a commissioner on the Children’s Commission.

### **Youth Leadership Council**

The State and Regional Youth Leadership councils were created in the 1990s and formalized in 2005 with the promulgation of rules in Texas Administrative Code, Section 702.515. The Statewide Youth Leadership Council provides a forum for youth who are currently or were formerly in foster care to discuss their experiences with the Texas foster care system and make recommendations for improving the system.

The Statewide Youth Leadership Council includes two elected or appointed youth or young adults aged 16 to 21 years from each region's Youth Leadership Council. Councils identify issues and make recommendations for improving services to children and youth in care, review policies and program initiatives, and give feedback DFPS reviews and

incorporates into the Title IV-B Annual Progress and Services Report (APSR), state planning, best practice efforts, or other program initiatives. DFPS also utilizes the Youth Leadership Council to seek input on policy development from children and youth involved with CPS to ensure the needs of this population are accurately met. The Statewide Youth Leadership Council meets at least two times per year, and regional Youth Leadership Councils meet at least three times per year. All youth and young adults who participate in these council meetings are between the ages of 16 and 21 years and live, or have lived, in a variety of placement settings, including foster homes, congregate care facilities, kinship placements, and Supervised Independent Living.

### **Texas Foster Family Association**

The Texas Foster Care Association, also known as the Texas Foster Family Association (TFFA), recruits and provides training opportunities to Texas foster families to promote the well-being of children in foster care. The Texas Foster Family Association also assists in providing training opportunities and support to adoptive, kinship, and General Residential Operation/Residential Treatment Center caregivers across the state. This non-profit organization holds an annual training conference, co-sponsors regional training and recruitment events, and provides information to members via a public website, [www.tffa.org](http://www.tffa.org), and social media, specifically Facebook Twitter, and Instagram.

The Texas Foster Family Association Board is made up of foster parents, DFPS staff, private child-placing agencies, as well as former foster parents who serve on the executive committee and head other committees. The full board and the executive committee hold at least three meetings per year to ensure goals are set, communication between participants occurs, and productive relationships are developed and maintained between foster families and staff. Regional DFPS staff, foster parents, and private-agency staff review proposed policies and make recommendations to improve foster family recruitment and retention and services to children in foster care. Input is incorporated into the DFPS strategic and programmatic planning process.

### **Kinship Collaboration Group**

The Kinship Collaboration Group provides a mechanism to include kinship caregivers in the design, implementation, and evaluation of the CPS program. This initiative encourages collaboration with kinship caregivers who are affected by the CPS service delivery system and provides a unique perspective on how to improve services to kinship caregivers and children.

Kinship caregivers involved in the DFPS system have an opportunity for input into system improvement and benefit from the support and knowledge that they are not alone in trying to care for their relative or kin children. The Kinship Collaboration Group structure consists of regional kinship support groups, which meet at least quarterly, and a statewide kinship collaboration group which meets four times a year. Initiated locally, regional kinship support group meetings continued using both the virtual platform shared statewide in a continued effort to grow the program and, in a limited capacity, in person in 2023. Kinship caregiver support groups are designed to educate kinship caregivers about the foster care system, develop tools and strategies to improve kinship care, and serve as a conduit

for new ideas. Caregiver-led involvement provides kinship development caseworkers and DFPS leadership with information needed to inspire a sense of urgency for the achievement of positive permanency for children in foster care.

### **Casey Family Programs**

In collaboration with the Texas Alliance of Child & Family Services and Casey Family Programs, DFPS convened workgroups involving internal and external stakeholders to propose additional solutions for creating a “kinship first” culture within the Texas child welfare system. These workgroups focused on ways to ensure children are placed with kin at the earliest point possible, as well as provide support to the kin caregiver after the child is placed. Through the support of Casey Family Programs, DFPS contacted other states including Florida, New Jersey, Oklahoma, and Utah to explore successful state implemented strategies. The group has explored:

- Increasing financial support for unverified kin caregivers;
- Providing access to respite care and enhancing day care benefits;
- Increasing behavioral and mental health supports;
- Expanding and improving practices related to finding and engaging kin caregivers; and
- Increasing verification of kin caregivers.

Initial workgroup recommendations were finalized in Fall 2022, and DFPS staff is now working on the next steps to facilitate some of those recommendations. A part of this project is the new specialized Kinship Treatment Foster Care Program which began in Spring 2023. The program provides extra training and support to kinship caregivers caring for children with specialized behavioral health needs.

Casey Family Programs offered technical assistance to support a steering committee to help develop, prioritize, and implement recommendations related to kinship care and building system capacity to address placement needs.

### **Child Fatality Review Teams**

Child fatality review teams are multi-disciplinary, multi-agency panels that regularly review child deaths, regardless of the cause, to understand risk to children and reduce the number of preventable child deaths. These teams are uniquely qualified to understand how and why children are dying in their communities. By sharing information, team members discover the circumstances surrounding a child’s death and utilize the information to make recommendations that may inform Child Protective Investigations (CPI) and CPS policies and practices.

Regional child death review committees review cases in which the death is determined to be the result of abuse or neglect and the family was previously involved with CPI or CPS or had an open CPI or CPS case at the time of the child’s death. This review occurs at the regional or local level and involves DFPS staff, as well as local stakeholders to identify any systemic issues that may have impacted service provision to the family. The recommendations from these reviews are shared internally with regional management for consideration and also forwarded to the CPI and CPS State Office to review for statewide implications and incorporation into strategic and programmatic planning.

The Child Safety Review Committee (CSRC) consists of the Office of Accountability director; the lead child fatality program specialist; and DFPS State Office representatives from Legal, CPI, CPS, Center for Learning and Organizational Excellence (CLOE), Child Care Investigations (CCI), Statewide Intake, and PEI. The CSRC also includes representatives from the state child fatality review teams, a representative of the Texas Council on Family Violence, and other community subject matter experts.

During quarterly meetings, the CSRC considers issues with statewide implications for policy, training, resource development, casework practice, and coordination with external entities. Through a review of recommendations from the regional child death review committees/citizen review teams, issues are identified and discussed. recommended actions determined by the CSCR provided to CPI and CPS leadership for review and follow-up.

### **Citizen Review Teams**

Citizen review teams are citizen-based panels established to evaluate DFPS casework and decision-making related to investigating and providing services to abused and neglected children. Membership includes community representatives and private citizens residing in the area for which the team is established. Texas Family Code, Section 261.312 requires each region to have at least one citizen review team. Five of these teams are designated as meeting the requirements of Child Abuse Prevention and Treatment Act (CAPTA), Appendix I. The CAPTA teams are in regions 01, 03 (03E and 03W), 06 (06A and 06B), 07 and 11. The CAPTA teams are required to meet at least quarterly to address a wide range of CPI and CPS issues from intake to adoption and must produce an annual report of their activities to inform the Title IV-B State Plan. Citizen review teams currently include CPI and CPS cases involving child fatalities meeting the criteria for a regional child death review committee meeting to improve policy, practice, and outcomes for such cases.

### **Texas Council on Adoptable Children**

The Texas Council on Adoptable Children (COAC) is a statewide organization intended to connect, train, engage, and support adoptive families for the purpose of maintaining and unifying a successful adoptive family. COAC helps adoptive families adjust to adoption and cope with any history of abuse and trauma to the child. This support is provided through a Texas Council on Adoptable Children State Board and regional branches. The State Board plans meets at least two times a year with a DFPS liaison to review current policies and provide feedback on the needs of adoptive families. Organization members advocate and share information with DFPS regarding issues of concern to adoptive parents and their families. COAC holds events to provide support and community for their adoptive families. During these events, COAC also provides specialized training for their adoptive children and parents. COAC held virtual meetings and will continue to hold at least one in-person board meeting a year. COAC was able to hold its annual Fun in the Sun event in fiscal year 2022 and plans to hold the event in fiscal year 2023 to provide families with training and engagement opportunities.

### **Interstate Compact on Adoption and Medical Assistance (ICAMA)**

Association of Administrators of Interstate Compact on Adoption and Medical Assistance (AAICAMA) is an incorporated non-profit organization which established rules and policies, applies for grants, authorized expenditures, and contracts for services on behalf of its members states. DFPS is a member of the Interstate Compact on Adoption and Medical Assistance (ICAMA), the interstate compact that protects the interests of children with special needs who have been adopted and placed or moved interjurisdictionally. DFPS sends a staff person to the annual AAICAMA National Conference. This conference provides training and supports DFPS in the proper and efficient administration of the state's Title IV-E program for adoption assistance.

### **Texas Council of Child Welfare Boards**

The Texas Council of Child Welfare Boards is a statewide network of county child welfare board volunteers who are concerned with the welfare of children, especially children suffering from abuse and neglect who are involved with DFPS. Representatives of these local county boards serve 11 DFPS regional councils that, in turn, provide representation on a state level to the Texas Council of Child Welfare Boards. The Texas Council's executive director, officers, and members work with CPS staff on programs that meet children's needs, network with other organizations to provide care for abused and neglected children and strengthen families through public information and education. The Texas Council reviews the Title IV-B State Plan annually, providing input and recommendations to DFPS on behalf of local county boards from every ~~region~~

### **Committee for Advancing Residential Practices**

The Committee for Advancing Residential Practices includes residential providers, residential provider associations, advocacy groups, and stakeholders. Representatives from HHSC Residential Child Care Licensing and DFPS Residential Contracts and CPS participate. The committee meets quarterly in an effort to strengthen the partnership, improve communication, provide a venue for focusing on advancements to residential practices that support enhanced safety, permanency, and well-being for children, and incorporate input into strategic and programmatic planning

### **Early Childhood Interagency Work Group**

Most early childhood programs and services in Texas are delivered through five state agencies: the Texas Education Agency, DFPS, the Texas Department of State Health Services, HHSC, and the Texas Workforce Commission. Programs and services provided by these state agencies often target the same population and serve related purposes. To maximize the outcomes for Texas children and families, these state agencies established the Early Childhood Interagency Work Group, along with the Interagency Deputy Director of Early Childhood Support, to coordinate across agencies and streamline efforts. The group's efforts are driven by the goals outlined in the *Texas Early Learning Council strategic plan* (<https://www.earlylearningtexas.org/TX-Early-Learning-Strategic-Plan.pdf>) and seven strategic priorities established by the workgroup related to data, funding, and information. This work includes establishing an early childhood integrated data system to combine data across programs that serve young children to increase data-driven decision making. The workgroup helped to guide development of an Early Childhood Texas

website (<https://earlychildhood.texas.gov>) developed as a one-stop resource for information on child health and development, parenting, childcare and education, and eligibility programs.

In fiscal year 2023, the U.S. Department of Health and Human Services' Administration for Children and Families along with the U.S. Department of Education awarded Texas a three-year \$48 million Preschool Development grant for funding years January 2023 through December 2025. The Texas Workforce Commission led the grant application in partnership with fellow members of the Early Childhood Interagency Work Group, including DFPS, HHSC, and the Texas Education Agency. The Texas grant builds on the six goals from the *Texas Early Learning Strategic Plan* and focuses on connecting families to services and engaging them as leaders, supporting local system building, expanding access to high quality programs, strengthening and building the early childhood care and education (ECCE) workforce, and developing an early childhood integrated data system. DFPS' PEI division will receive \$15 million over five years to award funds through a Texas Home Visiting and Healthy Outcomes through Prevention and Early Support (HOPE) competitive funding opportunity to further support early childhood systems building and family engagement initiatives in communities.

### **Prevention Framework**

Established in 2019, the Texas Prevention Framework Workgroup is comprised of representation from DFPS, HHSC, the Texas Department of State Health Services, the Texas Workforce Commission, Texas advocacy leaders, the state judiciary, and foundation, philanthropic, research, and parent partners. The workgroup focuses on transforming the child welfare system into a child and family well-being system through elevating cross-sector prevention efforts; expanding stakeholder inclusivity in the prevention of child abuse and neglect; and developing Texas's model of a public health approach to the child welfare framework. In fiscal year 2023, the Prevention Framework Workgroup continued to participate in the Thriving Families Safer Children learning collaborative. Representatives of the larger workgroup participated in national discussions regarding ways to promote upstream prevention and incorporate lived experience. PEI leadership meet regularly with the workgroup as thought leaders, using the prevention framework to further develop partnerships and commit to a common vision to support Texas families and messaging around DFPS work supporting children and families in Texas.

### **Rider 17.05 Juvenile Justice Prevention Group**

DFPS, the Texas Juvenile Justice Department, the Texas Education Agency, and the Texas Military Department continued to participate in an interagency workgroup to coordinate the delivery of juvenile delinquency and dropout prevention and intervention services. The workgroup's collaborative goals are to increase members' understanding of state juvenile delinquency and dropout services; identify key considerations in service provision; and identify strengths and gaps in current programming. Over the fiscal year, the workgroup met quarterly to discuss these goals and produce their annual *Agency Coordination for Youth Prevention and Intervention Report*, as required by the Texas Legislature.

### **Coordination with Children's Bureau Grant Programs Coordination**

DFPS continues to meaningfully involve representatives of Children's Bureau grant programs in service coordination and support of mutual goals for the following three Children's Bureau Grant Programs:

### **Community-Based Child Abuse Prevention**

DFPS has utilized Community-Based Child Abuse Prevention (CBCAP) funding for initiatives, programs, and activities to strengthen and support families to reduce the likelihood of child abuse and neglect. CBCAP major objectives include collaborating with communities to identify prevention and early intervention needs and helping to enhance and expand services. Due to the flexible nature of this funding, PEI has the ability to use CBCAP funding to support shared goals in various ways. A few examples of how this funding has afforded meaningful collaboration include:

- Fatherhood EFFECT (Educating Fathers for Empowering Children Tomorrow) programs provide free, voluntary parenting education and support to fathers and father figures. Grantees also participate in community coalition building and organizational change efforts to increase the quality of direct services targeted specifically for fathers and promote inclusion and support of fathers across multiple programs.
- In fiscal year 2023, PEI returned to hosting a statewide in-person Fatherhood Summit which serves as an opportunity for providers, community stakeholders, and state agency partnerships to celebrate the fatherhood work done across Texas communities, highlight fatherhood best practices and special initiatives, and share comprehensive approaches and resources to support Texas fathers and their families.
- The Texas Service Member and Veteran Families program provides support for families of children ages birth to 17 years in which one or both parents are serving, or have served, in the armed forces, reserves, or National Guard. Through supports such as parenting, education, counseling, and youth development programming, this program partners with military and veteran caregivers to support positive parental involvement in their children's lives and maximize their ability to give their children emotional, physical, and financial support.
- PEI's Partners in Prevention Conference (PIP) brings together the largest group of prevention and early intervention professionals in Texas. PEI celebrated its 22nd annual PIP Conference in September 2022 in Corpus Christi. This year's dynamic, interactive conference welcomed 1,109 prevention and early intervention professionals, including 857 in person and 252 virtual attendees, as they enjoyed 30 sessions, five intensives, and two memorable keynote sessions. The conference attracted parent educators, youth service providers, civic leaders, policy advocates, researchers, and others child and family well-being professionals for learning and networking. The conference theme, Anchored in Purpose, presented opportunities to explore how to stay anchored to a vision, mission, and goals, and where to find renewed purpose. Attendees demonstrated what drives their work through poster sessions and participation in fireside chats with PEI leadership, trainings, and networking opportunities.
- Continued collaboration at the community level to provide family services and supports

to prevent crises with the potential to result in the child welfare system involvement or the removal of their child continues to be highlighted by the low number of CPS-involved families for whom PEI provides services.

- PEI is actively working to strengthen parent and family leadership work. PEI hired a full-time parent partner to build upon past efforts and establish a Parent Advisory Council in fiscal year 2023. The parent partner and planning committee, which included three parent leaders, completed the recruitment of committee members. The PEI Parent Advocacy Council meets virtually to participate in training and support work on a charter, organizational documents, and a handbook. PEI also created a youth ambassador initiative to mirror the parent advisory council in elevating youth voice in prevention programming. The youth ambassadors also meet monthly and are creating foundational documents to support this initiative's sustainability going forward. Youth have worked on a writing contest to raise awareness of issues facing youth which launched in February 2023 for Youth Leadership Month. While DFPS has long engaged parent and youth advisory groups to provide leadership on child welfare policy and practice, these groups are uniquely positioned within PEI to work specifically toward building upstream prevention strategies.

### **Children's Justice Act**

The Children's Justice Act (CJA) is a federal grant awarded to each state to develop, establish, and operate programs designed to improve the child protection system in four primary areas:

- The handling of child abuse and neglect cases, particularly cases of child sexual abuse and exploitation, in a manner which limits additional trauma to the child victim;
- The handling of cases of suspected child abuse and neglect-related fatalities;
- The investigation and prosecution of cases of child abuse and neglect, particularly child sexual abuse and exploitation; and
- The handling of cases involving children with disabilities or serious health-related problems who are the victims of abuse or neglect.

As a requirement of the federal grant, Texas maintains a multidisciplinary task force on children's justice to oversee program activities.

Children's Advocacy Centers of Texas (CACTX) is the CJA program administrator and facilitates the Children's Justice Act Task Force comprised of professionals with knowledge of and experience with the child protection and criminal justice systems.

DFPS and the Children's Justice Act Task Force have a close, collaborative relationship, particularly on issues related to child safety. The task force has worked closely with DFPS regarding initiatives over the past several years which will continue for the next five years. A few examples of collaboration between the Children's Justice Act Task Force and DFPS include the following:

- The Children's Justice Act Task Force has a strong working relationship with DFPS and its senior leadership with staff serving as members of the Children's Justice Act Task Force, including the DFPS Investigation and Alternative Response director. CACTX staff regularly attend various stakeholder meetings, such as collaborative

committee meetings hosted by the Children’s Commission and quarterly Children’s Commission meetings. CACTX staff also attend relevant legislative committee hearings related to DFPS, as well as meetings held by DFPS advocates and stakeholders. DFPS staff frequently present at these meetings and give updates relevant to current issues.

- The Children’s Justice Act Task Force is focused on identifying strategies to address systemic challenges such as staff capacity and caseloads, as well as challenges related to recruiting and retaining qualified workers in all disciplines involved in the multidisciplinary response to child abuse and neglect, including child welfare, law enforcement, prosecutors, and medical providers.
- The *Children’s Justice Act Task Force 2022- 2024 Three Year Assessment* priorities and recommendations address problems related to workforce capacity, sustainability, and expertise, including resource constraints and insufficient services for stakeholders, children, and families. While the task force might be focused on specific stakeholders or aspects of a case that differ from DFPS’ overall priorities, both understand the serious difficulties represented by the problematic resource distribution, particularly in rural areas.

Children’s Justice Act funded projects demonstrating meaningful collaboration with DFPS include:

- CACTX) partners closely with DFPS to strengthen multidisciplinary teams from systems and local levels. This includes attending DFPS-related conferences, participating in regular meetings with DFPS staff, and various levels of information sharing.
- CACTX also partners closely with DFPS to address cases involving child sex trafficking. This includes partnering with DFPS Human Trafficking and Child Exploitation division and local DFPS leadership in developing local community responses through care coordination team and protocol development.

### **Collaboration on Behavioral Health and Medical Needs of Children in DFPS Conservatorship**

HHSC Medicaid/CHIP and Behavioral Health, DFPS, and the STAR Health managed care organization collaborate frequently regarding behavioral health and medical needs of children in DFPS conservatorship. Together stakeholders work closely to ensure children enrolled in Medicaid are receiving medically necessary access to care. These meetings and structured communications ensure coordination between entities occurs for the enhanced services outlined in this plan. Ongoing collaborations include:

- Regular meetings between HHSC and DFPS, including a monthly touch-base, a HHSC-DFPS STAR Health leadership meetings, as well as ad hoc meetings to address urgent issues;
- Monthly behavioral health leadership and routine coordination meetings with HHSC state hospital and substance use treatment services staff, Community Resource Coordination Groups, local behavioral and mental health authorities, and others for discussions tailored to behavioral health services issues;
- Daily regular updates from the STAR Health managed care organization on DFPS-identified high needs children who routinely fall into one of three groups – soon to be

released from an inpatient setting; released from an inpatient setting and awaiting placement; or children with complex needs – to ensure all parties are aware of service needs, efforts being made, and coordination of responses;

- Regular meetings of HHSC, DFPS, and the STAR Health managed care organization, such as the monthly joint meeting with standing agenda item on care coordination focusing on children lacking permanent placement and other children with special health care needs; a bi-weekly meeting with select leadership staff focusing on innovative solutions to complex problems and prioritizing discussions related to children lacking placement.
- A quarterly Psychotropic Medication Monitoring Group meeting chaired by the CPS medical director and including HHSC Medicaid/CHIP, DFPS, The University of Texas at Austin College of Pharmacy, the STAR Health managed care organization, and others to review Psychotropic Medication Utilization Reviews conducted by STAR Health; statewide data and trends regarding psychotropic medication use for children in foster care; and updates to the *Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health (2019)*; and
- Quarterly meetings with HHSC, DFPS, the STAR Health managed care organization, and external stakeholders affiliated with medical and psychiatric hospitals to discuss current challenges and changes impacting the transition of children with complex needs to stabilization.



**TEXAS**  
Department of Family  
and Protective Services

**The State of Texas**

**2024 Annual Progress & Services Report**

**Section III. Assessment of Performance**

**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## III. Assessment of Performance

- *Review and update the data and information provided in their 2020-2024 CFSP and subsequent APSRs. The state must identify strengths and concerns related to performance on each outcome and systemic factor, including evidence of disproportionality and disparities in services and outcomes.*
- *In developing updates specific to the systemic factors, states are also encouraged to review CFSR [Technical Bulletin 12](#) which describes CB's intention to emphasize reliance on rigorous evidence to assess systemic factor functioning.*

### **Safety, Permanency and Well-Being Outcomes**

The Texas Department of Family and Protective Services (DFPS) Child Protective Services (CPS) Federal and Program Improvement Review division conducts a quarterly case review of family-based safety services (FBSS), alternative response, and conservatorship cases using the federal Child and Family Services Review (CFSR) process and instrument. The reviews are referred to in this section as CFSR case reviews.

The CFSR quarterly case review sample is requested from the DFPS Forecast and Planning Division which is random and representative of the entire state universe for cases for each DFPS region, legacy and those covered with a Single Source Continuum Contractor (SSCC). The data request reflects the state ratio of foster care and in-home cases, meeting the minimum requirements for both case types. The sample covers the same time period as the federal Onsite CFSR six-month sample period and rolls forward three months every quarter. The sample period was six months for the foster care sample and six months plus 15 days for the in-homes sample. Alternative response cases were included in the in-homes sample.

The reading period starts on the same date as the sample period start date, but continues through the date when the quality assurance specialist finishes the case review (case review date). Conservatorship cases must be open for at least 24 hours during the review period. FBSS cases must be open for 45 consecutive days during the review period. For alternative response cases, five additional days are added due to the role of supervisory review and screening, including collateral contacts made by screeners prior to determining intake should be progressed to the alternative response stage. Juvenile justice cases open for DFPS services are included in the universe of cases randomly selected into either sample.

The Texas sample process continues to mirror the Federal Onsite Review process. Quality assurance specialists review 100 cases each quarter: 40 cases are FBSS/alternative response (in-homes) cases; and 60 are cases of children in DFPS conservatorship (foster care) cases. The Texas case review process also follows the federal Round 4 CFSR Case Review Criteria for case elimination. The case review results from the quarterly CFSR reviews continue to be used to analyze current performance and

are combined with other case reviews and/or data to best assess outcomes.

Texas successfully completed its Round 3 CFSR Program Improvement Plan negotiated between DFPS and the Administration for Children and Families (ACF) in May 2021 by making all required improvements as it relates to the safety, permanency, and well-being of youth in care. Round 4 CFSR reviews for Texas will be held April 1, 2024, to June 30, 2024, and planning is currently underway.

DFPS will update its internal tool to conform to the Round 4 requirements and will also use the federal portal system for the on-site review. The DFPS Federal and Program Improvement Review division has already begun staff training on the new tool and attended all webinars held by ACF. The Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (the Children's Commission), and CPS leadership representatives have attended monthly meetings with federal partners since October 2022 which provide information, resources, and support in completing the preparatory tasks for Round 4 CFSR.

All data provided throughout this report is current with data provided through Quarter 2 of fiscal year 2023, unless otherwise specified.

### **Safety Outcome Data**

Safety Outcomes: (1) Children are first and foremost, protected from abuse and neglect; and (2) Children are safely maintained in their own homes whenever possible and appropriate.

Below is a summary of the data used to assess Texas performance on child safety. There are two types of data. The first table contains the Federal Standard and the last four completed Texas CFSR quarterly case reviews. The data reflects performance on cases selected for review through the sample. The second table contains statewide data submitted to the Children's Bureau through the National Child Abuse and Neglect Data System and the Adoption and Foster Care Automated Reporting System. The Children's Bureau compares Texas data to other states for federally determined data indicators and standards. The third table contains statewide data regarding timeliness obtained from the DFPS monthly executive dashboard stored within the agency's Data Warehouse and based on documentation contained within IMPACT.

<b>CFSR Outcome/Item</b>	<b>Standard</b>	<b>Q4- 22</b>	<b>Q1- 23</b>	<b>Q2-23</b>	<b>Q3-23</b>
Item 1 Timeliness of initial contacts	95%	69.1%	72.3%	83.9%	68.4%
<b>Safety 1 First and foremost protected from abuse/neglect</b>	<b>95%</b>	<b>69.1%</b>	<b>72.3%</b>	<b>83.9%</b>	<b>68.4%</b>
Item 2 Services in home to prevent removal	90%	60%	69.6%	77.8%	68%
Item 3 Risk of harm to children	90%	68%	74%	78%	73%
<b>Safety 2 Safe in home when possible and appropriate</b>	<b>95%</b>	<b>59%</b>	<b>70%</b>	<b>75%</b>	<b>69%</b>

Source: CPS Division of Federal and Program Improvement Review

<b>CFSR Round 4 Statewide Data Indicators (Lower number desired)</b>	<b>National Standard</b>	<b>Texas Performance</b>
Recurrence of Maltreatment	9.7%	7.9%
Maltreatment in Foster Care	9.07	13.47

Source: CFPS Round 4 Statewide Data Profile – February 2023)

<b>Timeliness of Investigation Initiations</b>	<b>FY 2021</b>	<b>FY 2022</b>	<b>FY 2023-to-Date (through March 2023)</b>
P1 Investigations Initiated Timely	95.2%	92.6%	89.5%
P2 Investigations Initiated Timely	92.8%	89.2%	86.9%

Source: DFPS Data Book and Data Warehouse Report inv\_cps\_19

Based on the above listed Safety Outcomes data, the following is a brief assessment of strengths and concerns regarding Safety Outcomes 1 and 2.

Strengths:

- DFPS employs child safety specialists to conduct staff reviews and evaluations of cases determined to involve high risk; monitor cases with multiple referrals, and approve decisions and assessments related to investigations that involve a high risk to the health or safety of a child.
- DFPS utilizes a multidisciplinary team approach to investigating child abuse which helps lessen trauma to the victim and brings together the various professions involved in a child abuse case. It allows professionals from different entities to develop strategies. The meetings help to coordinate investigations between law enforcement and DFPS as well as victim's advocates and prosecutors.
- DFPS completes investigations jointly with law enforcement when there is a report

alleging a child has been or may be the victim of conduct constituting a criminal offense and poses an immediate risk of physical or sexual abuse of a child that could result in the death of or serious harm to the child. DFPS has written guidelines and protocols developed through a collaborative effort with DFPS, law enforcement agencies, and Children's Advocacy Centers of Texas.

- Caseworkers have access to the Forensic Assessment Center Network which provides consultations for DFPS investigative and FBSS workers in cases of suspected child abuse and neglect. Forensic Assessment Center Network physicians also provide ongoing training to caseworkers about issues surrounding child abuse and neglect.
- DFPS has advanced its statewide Alternative Response program which is a shift in how CPS responds to certain cases of alleged abuse and neglect while still keeping children safe. Alternative response allows CPS to handle less serious allegations of abuse or neglect in a more flexible way, engaging families while still focusing on the safety of the children. CPS provides services and support to help families resolve safety issues and reduce future CPS involvement.
- FBSS and conservatorship staff use the Family Strengths and Needs Assessment (FSNA) tool in all cases new to FBSS and conservatorship. This assessment helps caseworkers determine the parents' needs and strengths used to identify services to address the safety and risk factors in the home. The assessment guides decisions regarding goals and tasks on the Family Plan of Service. It is updated before every Family Plan of Service or Family Plan of Service Evaluation. This tool helps caseworkers determine if they have identified risk factors in previous stages of service, including throughout the conservatorship case, and adequately addressed them to ensure the safety of children reuniting with their families.

#### Concerns:

- For Safety Outcome 2 through CFSSR quarterly case reviews, the foremost concern noted in cases that did not score a strength rating was inconsistency in maintaining ongoing in-person contact with children and families to adequately assess and manage safety and risk. The gap most often occurred in time between identifying a safety need and providing appropriately matched services.

This information was provided to regional staff at the quarterly CFSSR case debriefings where each case reviewed was discussed with regional staff and management involved. Case-specific information is provided to the casework staff involved once a case review is completed.

#### **Permanency Outcome Data**

Permanency Outcomes: (1) Children have permanency and stability in their living situations; and (2) The continuity of family relationships and connections is preserved for children.

Below is a summary of the data used to assess Texas performance related to children in DFPS conservatorship achieving permanency. There are two types of data. The first table contains the Federal Standard, followed by the last four completed Texas CFSSR case

reviews. The data reflects performance on conservatorship cases selected for review through the sample. Per federal guidelines, cases in the FBSS sample are not assessed for permanency outcomes.

The second table contains statewide data submitted through the federal Adoption and Foster Care Automated Reporting System which provides the opportunity to compare Texas data to other states on federally determined data indicators and standards. ACF not only sets a standard, but also compares states which are comparable in demographic measures to set an acceptable range for the state. In the most recent federal data, Texas performance falls outside of the acceptable range in two measures: Permanency in 12 months for children entering foster care (The range Texas must exceed is 35.4 percent to 36.8 percent; Texas Risk Standardized Performance is 36.1 percent.) and Placement stability (The range Texas must exceed is 4.68 to 4.85 moves; Texas Risk Standardized Performance is 4.77 moves.).

<b>CFSR Outcome/Item</b>	<b>Standard</b>	<b>Q4-22</b>	<b>Q1-23</b>	<b>Q2-23</b>	<b>Q3-23</b>
<b>Item 4 Stability of foster care placement</b>	90%	86.7%	81.7%	95%	<b>88.3%</b>
<b>Item 5 Permanency goal for the child</b>	90%	61.7%	68.3%	68.3%	<b>70%</b>
<b>Item 6 Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement</b>	90%	53.3%	50%	53.3%	<b>65%</b>
<b>Permanency 1 Children have permanency and stability</b>	<b>95%</b>	<b>38.3%</b>	<b>26.7%</b>	<b>38.3%</b>	<b>45%</b>
<b>Item 7 Placement with siblings</b>	90%	92.9%	92%	86.7%	<b>92%</b>
<b>Item 8 Visits with parents and siblings in foster care</b>	90%	55.3%	57.8%	57.5%	<b>81.4%</b>
<b>Item 9 Preserving connections</b>	90%	83.3%	85%	75%	<b>85%</b>
<b>Item 10 Relative placement</b>	90%	95%	96.6%	91.4%	<b>91.5%</b>
<b>Item 11 Child's relationship with parents</b>	90%	43.8%	58.1%	58.3%	<b>72.2%</b>
<b>Permanency 2 Continuity/Family Connections</b>	<b>95%</b>	<b>70%</b>	<b>71.7%</b>	<b>70%</b>	<b>85%</b>

Source: CPS Federal and Program Improvement Review division

<b>CFSR Round 4 Statewide Data Indicators</b>	<b>National Standard</b>	<b>Texas Performance</b>
<b>Permanency in 12 months for children entering foster care</b>	35.2%	<b>35.0%</b>
<b>Permanency in 12 months for children in care 12-23 months</b>	43.8%	<b>60.4%</b>
<b>Permanency in 12 months for children in care 24 months or more</b>	37.3%	<b>38.0%</b>
<b>Re-entry to foster care in 12 months</b>	5.6%	<b>2.3%</b>
<b>Placement Stability</b>	<b>4.48</b>	<b>5.20</b>

Source: CFSR Round 4 Statewide Data Profile – February 2023

Based on the above listed Permanency Outcomes data from the CFSR online database, the following is a brief assessment of strengths and concerns regarding Permanency Outcomes 1 and 2.

Strengths:

- Texas consistently has a low rate of foster care re-entries for children who have exited substitute care.
- Case reviews show Texas does well in placing siblings together.
- Young adults who are not ready or may not choose to leave foster care at age 18 may stay in Extended Foster Care, if certain requirements are met.
- Young adults in extended foster care agreements can participate in the Supervised Independent Living program which is a type of placement where they can reside in a less restrictive, non-traditional living arrangement while continuing to receive casework and support services to help them become independent and self-sufficient.
- Permanency care assistance improves the lives of children and youth in foster care and increases the likelihood they will be able to leave the foster care system to live permanently with kinship caregivers.

Concerns:

- Children's permanency goals noted in the Child's Plan of Service and reports to the court are sometimes not appropriate for the child's situation or not being updated in a timely manner when the child's circumstances change.
- Staff does not consistently make concerted efforts to search for absent parents on an ongoing basis throughout the life of the case. In Permanency Outcome 2, this impacted *Item 8: Visits with Parents and Siblings in Foster Care* and *Item 11: Relationship of Child in Care with Parents*.
- When absent parents are located, staff does not always make concerted efforts to actively engage them in case planning and case activities.
- The length of time for kinship caregivers to complete the federal requirements for Permanency Care Assistance can be a barrier to achieving timely permanency for children whose goal is permanent placement with relatives.

- Compounding issues from the COVID-19 pandemic (e.g., uncertainty, isolation/quarantine requirements, temporary closure of office/courts/services, greater cost, etc.), increasing high acuity behavioral health needs of children in conservatorship, and increased scrutiny through heightened monitoring, have resulted in significant capacity challenges. These challenges have resulted in decreased capacity in all types of placement settings. Placement instability, increased time in care, and other consequences have escalated in the past three years.

### **Well-Being Outcome Data**

Well-Being Outcomes: (1) Families have enhanced capacity to provide for their children's needs; (2) Children receive appropriate services to meet their educational needs; and (3) Children receive adequate services to meet their physical and mental health needs.

Below is a summary of the data used to assess Texas performance on child and family well-being. The first table contains the Federal Standard and the last four completed Texas CFSR quarterly case reviews and reflects performance on cases selected for review through the sample. The remaining tables provide data associated with monthly in-person contacts as submitted to ACF Children's Bureau. This data is available monthly and annually and is stored within the DFPS' Data Warehouse. It reflects statewide data, not a sample of cases, and is based on documentation contained within IMPACT.

As allowed, Texas temporarily used virtual contacts for face-to-face contacts and visits until health concerns due to COVID-19 enabled resumption of in-person contacts. Guidance for visitation and contacts, as well as safety resources, remain publicly available on the DFPS website for access by staff, families, caregivers, and other stakeholders.

<b>CFSR Outcome/Item</b>	<b>Standard</b>	<b>Q4-22</b>	<b>Q1-23</b>	<b>Q2-23</b>	<b>Q3-23</b>
Item 12 Needs and Services of child, parents and foster parents	90%	53%	46%	62%	57%
Item 13 Child and family involvement in case plan	90%	51.7%	46.3%	61.7%	61.1%
Item 14 Caseworker visits with child	90%	84%	82%	83%	81%
Item 15 Caseworker visits with parents	90%	39.7%	36.4%	45.9%	45.3%
<b>Well-Being 1 Families have enhanced capacity</b>	<b>95%</b>	<b>52%</b>	<b>44%</b>	<b>59%</b>	<b>55%</b>
Item 16 Educational needs of the child	95%	93.1%	88.1%	94.4%	96.3%
<b>Well-Being 2 Services to meet educational needs</b>	<b>95%</b>	<b>96.4%</b>	<b>88.1%</b>	<b>97.1%</b>	<b>96.3%</b>
Item 17 Physical health needs of the child	90%	81.4%	72.9%	87.7%	86.4%
Item 18 Mental Health needs of the child	90%	78.9%	76.6%	86.2%	86.3%
<b>Well-Being 3 Services to meet physical and mental health needs</b>	<b>95%</b>	<b>76%</b>	<b>65.6%</b>	<b>82.2%</b>	<b>81.9%</b>

Source: CPS Federal and Program Improvement Review division

**Face To Face Contacts For Children in Conservatorship in Open SUB/ADO Stages (Multi-Month Year Summary) for Children Age 0 to17 Years, September 2021 to August 2022**

Month	Children Needing Contact	Contact Made in Report Month	Contact Made in Report Month %	Contact Recorded in IMPACT Timely	Contact Recorded in IMPACT Timely%	Overall Compliance	Overall Compliance %
21-Sep	26,849	26,503	98.7%	24,625	92.9%	24,625	91.7%
21-Oct	26,187	25,819	98.6%	23,868	92.4%	23,868	91.1%
21-Nov	25,088	24,737	98.6%	22,775	92.1%	22,775	90.8%
21-Dec	24,180	23,955	99.1%	21,982	91.8%	21,982	90.9%
22-Jan	23,654	23,426	99.0%	21,977	93.8%	21,977	92.9%
22-Feb	23,091	22,846	98.9%	21,484	94.0%	21,484	93.0%
22-Mar	22,414	22,223	99.1%	20,869	93.9%	20,869	93.1%
22-Apr	22,014	21,826	99.1%	20,453	93.7%	20,453	92.9%
22-May	21,580	21,379	99.1%	19,988	93.5%	19,988	92.6%
22-Jun	21,038	20,845	99.1%	19,416	93.1%	19,416	92.3%
22-Jul	20,731	20,524	99.0%	19,108	93.1%	19,108	92.2%
22-Aug	20,330	20,141	99.1%	18,539	92.0%	18,539	91.2%
<b>Statewide Total</b>	<b>277,156</b>	<b>274,224</b>	<b>98.9%</b>	<b>255,084</b>	<b>93.0%</b>	<b>255,084</b>	<b>92.0%</b>

Source: DFPS Data Warehouse - Report Number: SA\_42sy

Texas has a statewide, comprehensive healthcare system designed to better coordinate and improve access to health care called STAR Health which serves children as soon as they enter state conservatorship and continues in these transition categories. STAR Health members receive medical, dental, vision, and behavioral health benefits, including prescription medications. The program includes access to an electronic health record called the Health Passport, which contains a history of each child's demographics, doctor visits, immunizations, prescriptions, and other pertinent health-related information. STAR Health is contractually required to conduct ongoing oversight of the psychotropic medication regimens of children through the Psychotropic Medication Utilization Review process, using the most recent Psychotropic Medication Parameters. The current version can be found at: <https://www.dfps.state.tx.us/Child Protection/Medical Services/Psychotropic Medications.asp>.

The Texas Health and Human Services Commission (HHSC) monitors prescribing of psychotropic medication to youth in foster care. The resulting trends remain substantially

below the rates of 5, 10, or 15 years ago. The current rates indicate sustained long-term decreases in psychotropic prescriptions for children in foster care. Update on the Use of Psychotropic Medications for Children in Texas Foster Care: State Fiscal Years 2002-2019 Data Report is underway and are expected to be released by the end of calendar year 2023. The Psychotropic Medication Parameters are also currently under review, following a normal two to three-year schedule for routine review.

DFPS combines three critical tools for assessing the medical, behavioral, and developmental strengths and needs of children and youth entering DFPS custody. These assessments are referred to as “3 in 30” or three assessments within the first 30 days.

- **3-Day Medical Exam** – Within three business days, some children entering DFPS care must see a medical provider to check for injuries or illnesses and get any needed treatments. Policy changes are underway to ensure the 3-day medical exam is limited to children who meet certain criteria as identified in statute. These changes will be fully implemented by September 1, 2023.
- **Child and Adolescent Needs and Strengths (CANS) Assessment** – Within 30 days of entering DFPS care, children age 3 to 17 years old must get a CANS assessment to help inform the service planning and placement processes. The assessment helps DFPS understand the impact of the child’s trauma a child and their ability to cope. The CANS assessment identifies services and existing strengths, such as counseling and positive relationship, that may help the child.
- **Texas Health Steps Medical Checkup** – Within 30 days of entering DFPS care, children must see a medical provider for a comprehensive check-up with lab work. This ensures:
  - ▶ DFPS addresses medical issues early;
  - ▶ Children are growing and developing as expected; and
  - ▶ Caregivers know how to support strong growth and development.

HHSC, DFPS, and Superior Health Plan, the contracted STAR Health provider, monitor compliance by obtaining Texas Health Steps checkups within the first 30 days of a foster care episode. The most recent data (Fiscal Year 2022, Quarter 2) shows a 62 percent compliance rate. The CPS Federal and Program Improvement Review division completes review of the Texas Health Steps checkup compliance in a sample of conservatorship cases.

Analysis of data available to monitor CANS completion rates is accessible quicker, due to storage of all completed assessments in the eCANS portal hosted by the University of Kentucky. A determination to make telehealth an option for CANS on a permanent basis completed March 2021 was not only implemented to respond to the COVID-19 pandemic, but to also offer a solution to the barriers identified for full compliance. Those barriers included: insufficient CANS providers in an area; insufficient CANS provider capacity to provide a timely appointment; transportation challenges due to geographic location; or unsuitable appointments offers for the child or family (e.g., a conflict with school hours or a caregiver’s work schedule). A telehealth option addresses barriers and provides choice for the assessment of children and youth, though in-person assessments are preferred.

More information on the developmental, behavioral health and medical assessment tools can be found on the DFPS website at: [https://www.dfps.state.tx.us/Child\\_Protection/Medical\\_Services/guide-3-in-30.asp](https://www.dfps.state.tx.us/Child_Protection/Medical_Services/guide-3-in-30.asp)

Based on the above listed Well-Being Outcomes data from the CFSR online database, the following is a brief assessment of strengths and concerns regarding Well-Being Outcomes 1, 2, and 3:

Strengths:

- DFPS staff excels at assessing children and caregivers for needs and providing appropriately matched services to the child and support caregivers.
- DFPS staff excels at assessing children for educational needs and ensuring all needed services are provided.
- Children in DFPS conservatorship receive medical care through Texas Medicaid. Most of these services are provided through a statewide, comprehensive managed healthcare system known as STAR Health which delivers medical, behavioral, and dental services. Children in DFPS conservatorship receiving STAR Health are equipped with an on-line secure Health Passport containing all their important medical information and a log of their appointments based on claims data.
- The 3-day medical exam sustained in-person during the COVID-19 pandemic helped ensure children and youth coming into care were screened for initial medical needs. This provided the immediate connection to a primary care physician and/or medical resources for caregivers accepting children into their homes or programs during the COVID-19 pandemic.
- DFPS developed specialized positions to help meet children's well-being needs, including well-being, developmental disability, mental health, trauma-informed care, education, and substance use specialists, as well as nurse consultants and others.
- Caseworkers regularly provide quality visits to the children on their caseloads with the majority occurring in the child's residence. Virtual visits were briefly used to ensure health safety during the initial months of the COVID-19 pandemic. Screenings continue before face-to-face contacts, although they have resumed.
- DFPS efforts to strengthen the trauma-informed system of care to enhance services to children and families are well underway and done in collaboration with the Statewide Collaborative on Trauma-Informed Care, sponsored by the Children's Commission.
- DFPS has a strong collaborative relationship with the Children's Commission which launched and supports an Education Blueprint action plan in partnership with DFPS, the Texas Education Agency, and many stakeholders to improve educational outcomes for children in care.
- Each case reviewed is debriefed with regional staff involved in the cases. Regional systems improvement specialists receive case review results and are invited to participate in regional debriefings. This process increases staff awareness of the safety, permanency, and well-being outcomes for children and families and allows staff to apply lessons learned from prior cases reviewed to current casework practices.
- The DFPS Office of Child Safety independently analyzes both individual child abuse

and neglect fatalities, near fatalities, and serious injuries, as well as patterns and the systemic issues involved. It reviews state and national trends regarding child fatalities, near fatalities, and serious injuries in DFPS cases and the general population, as well as strategies available to deploy by DFPS programs and by other state agencies and local communities. This program has an overarching goal to support implementation of prevention and intervention strategies to address and reduce fatal and serious child maltreatment.

- STAR Health offers support services to children with primary medical needs. They can provide transportation of a child with primary medical needs in an ambulance or in a car with the support of a nurse during a removal or between placements, as well as disassembly and re-assembly of durable medical equipment by a qualified provider during the transition.

#### Concerns:

- The case review results show an ongoing need for concerted efforts to search for absent parents throughout the life of the case. When staff does locate absent parents, concerted efforts to actively engage the parents in case planning and case activities can be improved.
- Although the state scores well on the CFSR educational item and outcome, it does not always translate to good educational outcomes for children in care, especially youth aging-out of the foster care system. DFPS has developed a caseworker tip sheet with important information on assessing children for educational needs and ensuring appropriate service coordination.
- Concerns regarding limitations with some services described below) also affect Well-Being Outcomes.

The federal CFSR process also views the Texas child welfare system from the lens of seven "systemic factors." DFPS will provide systemic factor data in the Statewide Assessment in Round 4 of the CFSR. These are discussed below. Data is available for the system factors and will be represented in the CFSR Statewide Assessment.

#### **1. Information System Systemic Factor**

The Texas Statewide Automatic Child Welfare Information System where CPS staff records casework-related activities is known as IMPACT. All National Child Abuse and Neglect Data System and Adoption and Foster Care Automated Reporting System often referred to as "AFCARS" data comes from IMPACT. ACF commended DFPS on the accuracy of the IMPACT data, noting no issues were found surpassing the federal 3 percent error threshold, and Texas demonstrates ongoing commitment to ensuring high data quality. DFPS regularly instructs regional staff to review data on any AFCARS elements nearing the 3 percent threshold. According to the most recent federal Texas Data Profile (February 2023), IMPACT data reported is complete and of sufficient quality for a less than 2 percent error rate in all areas.

The same federal data profile for Texas indicates its National Child Abuse and Neglect Data System data is complete and performing above federal thresholds for accuracy. The most recent DFPS AFCARS Foster Care Data Compliance Report shows DFPS met

AFCARS standards. The DFPS Management Reporting and Statistics division tests the efficacy of the data captured in IMPACT for various data warehouse reports and federal data submission. DFPS Information Technology (IT) runs the AFCARS extraction file monthly through the federal validation tool. Items evaluated as being a concern due to data quality or data entry are addressed on an ongoing basis.

Accurate reporting of data is critical for Texas, and it is important that data reports be transparent for both internal and external stakeholders. The system has an excellent tracking and reporting capacity. The DFPS Data Warehouse stores information entered IMPACT and makes data more manageable and accessible for users to help with decision-making and research. DFPS Data Warehouse sections include, but are not limited to: intake, investigation; family stages; permanency planning (legal conservatorship); substitute care; adoption, foster and adoptive home development; and Preparation for Adult Living. IMPACT data is routinely published on the DFPS public website, enabling "real time" public scrutiny of the data by external stakeholders. Data, including the interactive Data Book, is available to the public at: [http://www.dfps.state.tx.us/About\\_DFPS/reports.asp](http://www.dfps.state.tx.us/About_DFPS/reports.asp)

IMPACT is designed so any DFPS employee with access can readily identify the status of each case through conducting a person and case search and viewing the case summary. While cases can be viewed by authorized staff statewide, only the assigned primary or secondary workers, supervisors, and others with the appropriate security profile (i.e., chain of command) can alter data entry.

All caseworkers receive formal training on IMPACT when they are hired. Supervisors are responsible for ensuring their caseworkers are completing accurate data entry. Supervisors constantly review their caseworker information in IMPACT during case staffing, readings, and approvals. All critical casework documentation by caseworkers requires supervisory review and documented approval in IMPACT.

"Live case reviews", or case reviews of active cases, have been implemented in multiple stages of service. Live case reviews occur in investigation cases through child safety specialist and risk manager reviews. A Parental Child Safety Placement team conducts live case reviews on investigation or FBSS cases with a Parental Child Safety Placement team. Live case reviews occur in FBSS cases through a dedicated quality assurance team. Program directors in multiple stages of service use a case review tool to review a sample of open cases on the staff workloads in their jurisdiction. Live case reviews add another layer of accountability in ensuring accurate and timely data-entry. Staff involved in these case reviews has direct interaction with the staff working the cases and doing the data entry.

Case reviews performed by the CPS Federal and Program Improvement Review division use samples of cases open in a prior period of review and are not considered "live case reviews" although some may still be open. These case reviews include quarterly CFSR, screened intake, eligibility assistance, and other ad hoc case reviews. These case reviews also ensure data entry is correct and up to date.

Upon completion of case-related tasks, employees submit IMPACT documentation for supervisory approval. After the supervisor reviews and approves submitted documentation, the automation design prevents further editing. If there is a determination an error must be corrected, staff contact the Application and Data Support team which is able to correct data entry errors. This helps ensure accuracy in IMPACT resolving more complex data integrity issues by providing guidance to staff regarding common functions, processing data correction requests, and, upon request by program management, The team provides guidance in correctly documenting casework actions in IMPACT and research opportunities to improve the systems to reduce errors. The Application and Data Support team manages application security and user permissions, merges, and client role removal when approved. Merge specialists perform appropriate person merges to eliminate duplicate records which improves IMPACT accuracy and staff ability to locate case history.

As a supplement to the Application and Data Support teams, DFPS employs approximately 150 regional staff identified as "fixers" who can correct some data problems in IMPACT without going through the Application and Data Support teams. Minor changes to service authorizations, legal status or actions, placements and other foster care payment concerns can be corrected by a regional fixer. The IMPACT data corrections self-service online feature, called the "Make Your Own Ticket" online application, allows staff to quickly create direct online tickets to resolve IMPACT data errors that cannot be corrected regionally and require specialized assistance. This team and its procedures allow for data corrections to occur when needed, but also ensure an overall accountability process for correcting data already approved by a supervisor.

IMPACT is set up similarly to a physical case file with separate tabs for the various stages of work, including investigation, FBSS, conservatorship, kinship, adoption, and others. Each CPS worker's IMPACT homepage displays all stages assigned to a worker, including the dates when the stages were opened and assigned. Within each stage of service, there are pages where a caseworker can document principal people in the life of the case, services provided to families and children, legal actions, and case contacts. The cases include demographic information about the children and families, including placement information for children in foster care, as well as qualitative narrative information on each case. IMPACT also includes demographic information on the populations served by DFPS, including names, dates of birth, races/ethnicities, and person identifiers. Family Plans of Service and Child's Plans of Service with permanency goals are developed in IMPACT. Workers can also view supervisor approvals or rejections, upcoming court dates, medical appointments, and more.

### **Intake Stage**

When an abuse or neglect referral is received at Statewide Intake, an intake stage is created in IMPACT. During the intake process, the worker gathers family information if known to the reporter, including person identifiers such dates of birth, Social Security numbers, addresses, and other demographic data. This information, along with the reason for the call, is recorded. In the intake stage, an employee can review CPS case

history or family tree information; review the referral information; document or view contacts made in this stage; run background checks; or perform case management tasks, such as recording the reason for closing the intake without assignment. Priority 1 or 2 intakes are routed directly to regional staff for assignment or regional screeners for additional information gathering.

Upon gathering additional information regarding the family, a regional screener determines if an intake with an original Priority 2 assignment is appropriate for alternative response, a traditional investigation, or closure without assignment. Any additional stages opened as a result of the intake remain in the same case with the same case identification number and stay attached for case history purposes. All case stages and any additional history for any principal case member, including other case identification numbers, can be viewed. Every IMPACT stage of service has a case summary page that functions in the same manner.

### **Alternative Response Stage**

If the statewide screener determines the intake meets criteria for a non-traditional response, an alternative response stage is opened and assigned to local staff. The assigned caseworker meets with the family and records interactions in the alternative response stage. In IMPACT, employees can view the reason for involvement; update person identifiers; add or view contacts made with the family; record assessments; document resources offered to the family; record legal actions and medical assessments which occurred during the case; and perform case closure tasks, such as actions taken to ensure child safety during the alternative response stage.

### **Investigation Stage**

When an intake is routed to a traditional investigation, either directly after intake or after review by the regional screener, an investigation stage is opened. The intake stage is closed, and all investigative actions are documented in the investigation. From the investigation stage, employees can view the reason for involvement, update person identifiers, and add or view contacts made with the family.

Actions taken to initiate the investigation, including interviews of all alleged victim children, are recorded in the contact/summaries section. Initial allegations and any added during the investigation are recorded on the allegation page. Prior to stage closure, the assigned casework inputs severity and disposition for each allegation. When services are authorized and paid for through CPS contractors, paperwork to record and approve payment are entered under service authorizations.

Through this stage, employees can view legal actions taken, risk and safety assessments conducted, medical assessments made, and removal of the child(ren) from the home. In the case management section, employees can view or record the investigation conclusion, including the overall disposition and recommended action; services and referrals provided; family team meetings conducted; emergency assistance eligibility determinations; child sex/labor trafficking information; and parental child safety placements which occurred during the investigation.

When assessments indicate, ongoing services are needed to protect the child without the need for legal removal, an in-homes or FBSS stage is opened. From the FBSS stage, employees review the reason for involvement and decision to open the case for ongoing services, update person identifiers, add or view contacts made with the family, and record legal actions and medical assessments which occurred during the case.

Per policy, a Family Plan of Service is developed with the family and recorded in IMPACT which allows caseworkers to update subsequent plans and displays a running list of when plans were completed. If safety issues indicate the necessity to remove the child(ren), the legal removal of the child(ren) is recorded on the conservatorship removal page. The reason for stage closure is recorded in the case management section.

### **Family Based Safety Services/In-Homes Stage**

When a child's removal is entered in either the investigation or FBSS stage, a foster care/substitute care stage is opened for each child, and a family stage is opened for the case. All conservatorship actions for each child are entered in the stage specific to that child. Each substitute care stage has various tabs for caseworkers to use for data-entry.

### **Foster Care Stage**

Specific demographic information is entered into IMPACT for each child in foster care. The statewide intake specialist enters information during the initial report of abuse or neglect, and the investigation caseworker continues to enter information while working the case through the end of the investigation stage. IMPACT is designed so entry of key demographic information, such as name, date of birth and gender, is required before the caseworker can move to other parts of the system. The supervisor is ultimately responsible for ensuring key information is entered before approving the stage closure. If ongoing in-homes or foster care case are opened, the information follows the principals from stage-to-stage, stemming from the unique person identification number (PID) IMPACT assigns to each data-entry of a person.

Texas' compliance with AFCARS and National Child Abuse and Neglect Data System data indicates staff is entering all the needed information on principals in IMPACT. ACF has noted the accuracy of DFPS IMPACT data in recent federal data profiles.

The DFPS Data Warehouse also has *Report SA\_04, Demographics of Children in Foster Care* to show the foster care children's demographics, including age, gender, race/ethnicity, and any child characteristics. This report can be pulled by region, county, or unit and worker level and includes the unit number, the total number of children with an open case, and child characteristics. It is the supervisor's responsibility to use this report to ensure the demographic information entered by caseworkers in IMPACT is correct and up to date. The demographic information captured in IMPACT includes:

- Date of birth;
- Gender;
- Language;
- Address at time of removal and subsequent addresses through the life of the case;

- Race/ethnicity;
- Person characteristics;
- Name history;
- Income/resources;
- Educational information; and
- Placement log.

In IMPACT, each child's individual substitute care stage includes a tab for legal status and legal actions. Legal status allows the caseworker to enter in a log of all the child's legal statuses as they occur and includes temporary managing conservatorship, permanent managing conservatorship with or without termination of parental rights, adoption consummation, and DFPS legal responsibility terminated. All substitute care stages also display a "Legal Status for Case" tab, which allows the user to see all legal status entries for any siblings associated with the same case ID number. The legal action tab permits caseworkers to enter in all hearings and court orders associated with the child's case. A comment section allows the caseworker to document any special information from the hearing, including the next hearing date. In Texas, it is common practice for judges in CPS cases to give verbal notice in court of the next hearing which the court usually incorporates in the court order for that hearing.

Each child in foster care has a tab for Child's Plans of Service. The plan includes the identified permanency goal for the child in care. IMPACT keeps a log of all Child's Plans completed for each child during the foster care episode. A second tab titled "Child's Service Plans for Case List" compiles a listing of all Child's Plans of Service associated with the overall case identification number, including any plans of service for siblings also in foster care. This list includes the date the plan was entered, the approval status, the type of child's plan and date completed, and the child's name.

Each child in foster care has a placement tab, where all placements for the foster care episode are listed in chronological order. Placement information includes the name of the caregiver; placement type; physical address and phone number; documentation of the child's understanding of the placement; and identification of placement issues, including appropriateness of the placement, least restrictiveness, close proximity, and educational issues. If a child leaves that placement, an end date and a reason for the ending is documented. Policy requires the caseworker enter information about the placement into IMPACT on the day of the placement or by 7:00 p.m. the next calendar day. Policy also requires the placement be approved by a supervisor level employee or above within seven days of data entry. Additional quality assurance checks are built into IMPACT to ensure correct placement data entry, including the mailing of the child's Medicaid card and the foster-care reimbursement payments foster parents receive for children in their care to the placement, based on the placement logs in IMPACT.

Additional tabs for children in foster care include a medical/dental log, foster care eligibility and options for data entry on Permanency Care Assistance and Interstate Compact for the Placement of Children out-of-state, should those apply. The medical/dental log can be cross-checked with the information entered into the child's STAR Health Passport on

the Superior Network portal.

During the foster care case, the worker also records family information in the family substitute care stage. Data specific to the parents or family can be entered in this stage, including the Family Plan of Service. Like the Child's Plan of Service, the Family Plan of Service is entered and approved in IMPACT, including plans developed as part of a family group conference. The family plan tab contains a listing for each plan of service created for all parents involved in the foster care case.

### **Kinship Care Stage**

Kinship care is the care of a child by relatives or close family friends, also known as "fictive kin." After noncustodial parents, kinship caregivers are the preferred placements for a child who must be removed from their home because it maintains the child's connection with their families and communities. The kinship care stage in IMPACT includes a person tab to identify the kinship caregiver's name and the child(ren) placed in the home, as well as a contact and summaries tab for the caseworker to document all contacts with the caregivers or child(ren), and demographic information on the home. There is also a home assessment/addendum tab for information on what the caregivers may need to support the child(ren)'s placement, as well as a developmental plan tab if the need arises to develop a formal plan for the kinship caregivers.

### **Family Substitute Care and Family Reunification Stages**

If the child returns to the care of a parent, a family reunification stage is opened. This stage contains the same data entry tabs as the family substitute care stage but is utilized when the child is on a monitored return or placed with a non-custodial parent with the intent for the noncustodial parent to ultimately assume full parental responsibility (i.e., managing conservatorship). All stages are closed when CPS no longer has conservatorship of any child related in the case.

### **Adoption Stage**

If the child does not return home and parental rights are terminated, the open family stages are closed, but the substitute care stage remains open. Upon selection of a prospective adoptive family, an adoption stage is opened. As with the substitute care stage, adoption stages are child specific, but remain within the original case. In the adoption stage, employees can view or record substitute care activities. Additionally, applications for adoption assistance subsidies and Interstate Compact on the Placement of Children requests are documented through the adoption stage. The adoption stage is closed when the adoption is consummated, and DFPS is dismissed from legal custody of the child.

Regular exposure to DFPS data has provided an opportunity for external review of the data. Federal and program improvement review case review staff have an opportunity to compare data within IMPACT to any information received during case-specific stakeholder interviews.

A daily file with demographic information is transmitted through an electronic portal to

HHSC, sharing IMPACT data and allowing data sharing with the Medicaid and benefits records known as Texas Integrated Eligibility Redesign Systems (TIERS). Data not matching TIERS information, such as dates of birth, Social Security numbers, names, Medicaid numbers, or other demographic information, are returned to staff within the CPS Federal and State Support Services division to resolve errors.

Several data warehouse reports are monitored by regional and DFPS State Office staff to ensure timely data entry and monitor missing information. These reports are available from the state level to the unit level, down to a weekly frequency for appropriate monitoring. Regular reports measure the amount of in-person contacts between a child in foster care and the caseworker, and the percentage of the contacts in the child's residence:

- Data warehouse report af\_02: Contacts - Adoption and Foster Care Automated Reporting System Foster Care Children (State FY 2012 Forward)

Data warehouse reports also monitor permanency Reviews: (AFCARS Foster Care Element #5)

- Data warehouse report af\_12: AFCARS Children Needing Legal Action Recorded or Corrected
- Data warehouse report pp\_09: TMC/PMC - Legal Action

Various case reviews assist in ensuring correct data entry and information. Cases can be reviewed by regional management for any reason, all the way up the chain of command. Any data questions or discrepancies found during formal or informal processes are addressed with the regional staff, and corrections made as needed. Billing reports associated with paid foster care placements offer another way to ensure the data entered is correct for children in foster care. Beginning in 2014, Case Connection was implemented to allow more than 7,000 Court Appointed Special Advocates (CASA) staff and volunteers to view relevant case data. This transparency helps increase data integrity and improve services.

DFPS collects service, demographic and outcomes data for the National Youth in Transition Database for youth at age 17 and a random selection of those youth at age 19 and 21. Every third year, DFPS collects outcome data on a new cohort of youth or young adults. While DFPS has collected certain data in IMPACT in the past, the National Youth in Transition Database reporting requirements have been a catalyst for making improvements to IMPACT and helped staff become more efficient and consistent with data entry. In addition, collection of outcome survey results in IMPACT allows DFPS to do comparisons with other data in the system which can be used as a tool for program improvement.

The Texas Legislature appropriated additional staff and funds to modernize IMPACT and grant external access. The funding provided has allowed DFPS to progress on a multi-year modernization effort. This initiative is designed to transform an older system into a

more modern one in terms of information technology and software architecture.

Stakeholders involved with the systemic factor of IMPACT in addition to DFPS, include HHSC, the Office of the Attorney General, the Court Improvement Project, the Texas Department of Public Safety, the Federal Bureau of Investigation, the Texas Juvenile Justice Department, Youth for Tomorrow, Neabus, Forensic Assessment Center Network, Superior/Health Passport, Chapin Hall, the Legislative Budget Board, CASA, and SSCCs. Additional information about IMPACT and other information systems technologies is detailed in Section V, Program Support.

Based on the above information and input from stakeholders' brief assessments of strengths showing the effectiveness of the information system are below.

#### Strengths:

- IMPACT contains step-by-step instructions and search features found in the "FYI Help" component of the system.
- Staff receives initial training on IMPACT in CPS professional development.
- Quality assurance staff notify direct delivery staff when an AFCARS data element error is found during a case review with instructions for correction.
- Staff receives training whenever a new functionality is rolled out.
- The system is available to staff and approved private-sector organizations across the state 24 hours a day, 7 days a week.
- The system supports all aspects of casework from intake to post adoption services.
- Mobile tablets are available to field staff and compatible to IMPACT. Mobile tablets enable caseworkers to make up-to-date, real-time documentation and case consultation while in the field.
- DFPS is currently funded for and implementing IMPACT modernization.
- ACF has reported to DFPS that the AFCARS and National Child Abuse and Neglect Data System data are reliable for their reporting usage.

#### Concerns:

- As with any computer-based system, IMPACT requires enhancements and updates on an ongoing basis.
- Some staff still struggle with using their mobile tablets at their true capacity to complete tasks while in the field.

DFPS plans to continue training staff both initially and ongoing on IMPACT and intended technology usage to be efficient as mobile caseworkers. The use of mentors for new caseworkers assists with this process.

## **2. Case Review Systemic Factor**

When children must be removed from their parents and placed in substitute care, CPS develops a case plan consisting of a Family Plan of Service and a separate Child's Plan of Service. The initial Family Plan of Service is due within 45 days from the date the child enters substitute care. The initial Child's Service Plan is also due within 45 days.

In IMPACT, each child in care has their own substitute care stage. The substitute care stages are attached to the parent's family stage. These stages stay attached to each other for case history, even if parental rights are ultimately terminated. Each substitute care stage has various tabs for caseworkers to use for data entry, including a tab for the Child's Plan of Service. IMPACT keeps a log of all Child's Plans of Service completed during the child's out-of-home care episode. This list includes the date each plan was entered; the approval status of the plan; the type of plan and date completed; and the child's name. A second tab titled "Child's Service Plans for Case List" will pull a similar listing but includes all Child's Plans of Service associated with the overall case ID, including any plans of service for siblings also in foster care.

DFPS performs well in the area of completing the Child's Plan of Service. The following report shows for fiscal year 2021 a 99.7 percent completion rate for initial Child's Plans of Services.

### Initial Child's Plan of Service for Children in Open Substitute Care From September 2021 to August 2022

Month	Initial Plan Required	Initial Plan Completed	% Completed	Initial Plan Not Completed	% Not completed	Due This Month Total	Due This Month and Completed	% Due This Month and Completed	Due this month and Completed in 45 days	% Due This Month and Completed in 45 days
21-Sep	23,860	23,805	99.7%	63	0.3%	1,024	910	88.9%	827	80.8%
21-Oct	23,190	23,130	99.7%	60	0.3%	819	741	90.5%	682	83.3%
21-Nov	22,296	22,240	99.7%	56	0.3%	688	623	90.6%	594	86.3%
21-Dec	21,642	21,588	99.8%	54	0.2%	570	526	92.3%	482	84.6%
22-Jan	21,142	21,092	99.8%	50	0.2%	697	655	94.0%	595	85.4%
22-Feb	20,767	20,718	99.8%	49	0.2%	543	503	92.6%	475	87.5%
22-Mar	20,403	20,356	99.8%	47	0.2%	702	660	94.0%	619	88.2%
22-Apr	20,031	19,979	99.7%	52	0.3%	804	756	94.0%	711	88.4%
22-May	19,561	19,509	99.7%	52	0.3%	829	775	93.5%	732	88.3%
22-Jun	19,155	19,099	99.7%	56	0.3%	742	683	92.0%	629	84.8%
22-Jul	18,894	18,827	99.6%	67	0.4%	736	674	91.6%	622	84.5%
22-Aug	18,541	18,466	99.6%	75	0.4%	758	709	93.5%	664	87.6%
<b>Total</b>	<b>249,490</b>	<b>248,809</b>	<b>99.7%</b>	<b>681</b>	<b>0.3%</b>	<b>8,912</b>	<b>8,215</b>	<b>92.2%</b>	<b>7,632</b>	<b>85.6%</b>

Source: DFPS Data Warehouse Report SA\_52

The CPS Federal and Program Improvement Review division reviews 60 foster care

cases each quarter using the federal CFPSR Onsite Review Instrument. The CFPSR case review instrument, specifically Item 5 (selecting an appropriate permanency goal for a child in a timely manner), shows room for improvement in this area during this reporting period:

CFPSR Outcome/Item/Data Indicator	Standard	Q4-22	Q1-23	Q2-23	Q3-23
Item 5: Permanency Goal for Child	90%	61.7%	68.3%	68.3%	70%

DFPS continues to utilize the Family Group Decision Making process as a way to complete service plans while engaging the family and people the family considers as support systems. In fiscal year 2022, DFPS held a total of 22,454 Family Group Decision Making meetings to assist with case planning. This includes 8,556 Family Group Conferences, 11,756 family team meetings, and 2,142 Circles of Supports. (Source: DFPS Data Book)

DFPS and residential service providers have collaborated on development of a single Child's Plan of Service to meet requirements for both DFPS and child-placing agencies to reduce duplicative paperwork for the same child and decrease any confusion for the child, caregivers, and parents. The joint project includes participation from multiple DFPS divisions, child-placing agencies, Residential Treatment Centers, and other service providers. The Single Case Plan meeting model, rolled out in several DFPS regions, depending partially on Community-Based Care implementation and choice, consists of phases. The first phase of creating of a uniform Child's Plan of Service used by all residential providers is complete. The development of a meeting model which creates a DFPS-led collaborative meetings with all stakeholders involved with the child has occurred. The meeting is used to develop the initial Child's Plan of Service. The last phase of implementation, joint development of the Child's Plan of Service by DFPS and the provider through IMPACT, continues to be explored with the external stakeholders to determine the best time frame for full implementation.

### **Family Plan of Service**

When creating the Family Plan of Service, the caseworker conducts a FSNA with the parents to help identify areas of strengths and needs to assist in developing the Family Plan of Service. Both custodial and non-custodial parents are invited to participate in all service planning efforts. After information is gathered using the FSNA, a meeting is conducted to create the Family Plan of Service. The meeting may occur with 1) the parents only; 2) the parents and any significant people the parents invite; or 3) the parents, relatives, extended family, fictive kin, and other significant people. The Family Plan of Service identifies the permanency goals for child(ren) and the services provided to the parents. DFPS uses a Family Group Decision-Making model and invites families to participate in service plan development in a format ideally chaired by a Family Group Decision-Making trained facilitator. Meeting formats are family group and permanency conferences with a focus to help family, extended family, and kinship members develop a service plan to address the abuse and neglect issues identified by those present,

including CPS. The results are used as the service plan, provided the concerns of DFPS and the court are addressed.

### **Child's Plan of Service**

A child's unique needs and the means to address those needs are identified in the Child's Plan of Service. The Child's Plan of Service identifies the permanency goals for the child. The worker involves the child in the development of the plan, and the child signs the written plan, if old enough. The worker also involves the child's caregiver, parents (if parental rights have not been terminated), relatives, caring adults, and other professionals involved with the child in the development of the child's plan and subsequent reviews.

### **Family Plan of Service Reviews**

At a minimum, the Family Service Plan is reviewed in the fifth and ninth months a child is in care and every four months thereafter. It is reviewed more frequently, as needed and as circumstances change. If the child is returned home, a review is completed noting any remaining issues to be addressed so DFPS can exit the case. Reviews may be done in one or more of the same formats as noted above. If DFPS is given permanent legal custody (i.e., permanent managing conservatorship), and if the permanency goal is no longer family reunification, the open family stage is closed, and no further Family Service Plan review is completed. If parental rights were not terminated when DFPS was given permanent managing conservatorship, family service planning continues for an additional six months. After the initial six months of DFPS permanent managing conservatorship, the Family Plan of Service is reviewed and updated every six months. If siblings remain in the home and DFPS either has an active legal case on those children or at the parents' request, DFPS may provide services to those children.

### **Child's Plan of Service Reviews**

At a minimum, the Child's Plan of Service is reviewed in the fifth and ninth months a child is in care and every four months thereafter. If DFPS has permanent managing conservatorship and a child's service level is above basic, and the Child's Plan of Service is reviewed every three months; otherwise, the review is at least every six months. Since contracted providers (e.g., child-placing agencies and residential care facilities) use a single child plan form, DFPS attaches that form to the plan from CPS records. In those circumstances, the combined plan is used for the review of the Child's Plan of Service. The worker does not update the Child's Plan of Service after every placement but does update it within 30 days of a significant change in the case or a change in the child's permanency goal, in addition to the above timeline.

Whether permanency hearings held when the child is in DFPS temporary managing conservatorship or permanency hearings after final order when the child is in DFPS permanent managing conservatorship, court reviews monitor compliance with case plan requirements as discussed in the court reports and testimony for those hearings. DFPS measures and monitors compliance with completion of these plans within appropriate time frames, as well as the number of children who do not have an identified goal.

Periodic reviews are conducted through the court review process in Texas during the following: the initial and subsequent permanency hearings while the case is in temporary

legal status; hearings in which permanent orders are issued naming DFPS as the permanent managing conservator; and hearings held after final orders are entered. Notices regarding court hearings are given to parents, the caregivers, and children. Workers encourage these key participants to attend. Children must be present at court hearings unless excused by the judge, and if they cannot attend, they are encouraged to write a statement that can be presented to the court. The court consults with the child in a developmentally appropriate manner regarding the child's permanency plan, if the child is 4 years-of-age or older and if the court determines it is in the best interest of the child. Some courts schedule time to meet with children outside the court hearing to accommodate school and other scheduling needs, as well as meet with the child in a less formal court setting.

All parties involved in CPS cases continue to struggle with securing consistent and timely notice of scheduled hearings from DFPS. This issue includes the foster placements and DFPS service provider facilities where the children or youth are in placement and results in many parties not being able to attend scheduled court hearings.

The number of Notice and Engagement system users continues to increase. A total of 78 new users signed up in fiscal year 2023 from October 1, 2022, to March 31, 2023, through the Notification and Engagement system to receive hearing notifications, bringing the total number of users to 2,154. Hearing notifications were sent for 4,329 hearings with a total of 11,906 notifications sent this fiscal year. The numbers of users signing up for notification via text message has also increased. Since this notification option was added in 2018, a total of 418 users have used the text feature. The Office of Court Administration created an Application Programming Interface to allow courts other than those using the Child Protection Court Case Management System (CPCMS) to upload their hearing data into the system. The goal is to expand the hearing notification tool to all courts hearing child welfare cases to provide parties with up-to-date hearing information and courts with an alternate means of no-cost notification. The Office of Court Administration is working to identify jurisdictions interested in adopting the interface.

The Children's Commission funded the collaborative video conferencing project to allow youth to remotely participate in court proceedings, but COVID-19 has forced a monumental change in youth participation in court. In March 2020, the Office of Court Administration provided licenses for the Zoom video conferencing tool to all Texas courts. The necessity of virtual hearings and universal court access to video conferencing technology allowed more parents and youth to attend hearings virtually and for courts to engage families and determine how to make best use of the virtual environment. For the past three years, Zoom has been used for video conferencing hearings, and the child protection courts have provided feedback to support Zoom as the preferred video conferencing application. The Children's Commission also funded upgraded technology to support hybrid hearings in six pilot courts to identify what equipment may be needed for other courts to maintain the benefits of virtual participation even though the pandemic has concluded.

Permanency hearings are held when a child has been in care six months, and every four

months thereafter, while the case is in temporary legal status. If a final order is issued in which DFPS receives permanent managing conservatorship, a permanency hearing after final order is held every six months thereafter. If parental rights are terminated, a permanency hearing has to occur within 90 days. At each review hearing, the court inquires as to the progress made since the previous hearing, including the use of any recommended services. Some courts require more frequent review of the child's permanency plan than what is required by statute. Knowing the judge will ask about progress in addressing the recommendations, orders, and results since last review requires workers to ensure the Child's Plan of Service addresses those issues. Caseworkers, supervisors, and program directors are responsible for monitoring the progress of children in substitute care.

For children in DFPS permanent managing conservatorship, permanency planning meetings are held initially after DFPS receives permanent managing conservatorship and annually thereafter, if the child is not in a permanent placement. The meetings focus on the permanency goals, reasons the child is not in a permanent placement, barriers to achieving permanency, and next steps to obtain a permanent placement for the child. For youth aged 16 years and older, regardless of legal status, Circles of Support may be used to address permanency and the youth's transition to a successful adulthood. In fiscal year 2022, a total of 2,142 Circles of Support, both initial and subsequent conferences, were completed for youth in DFPS conservatorship.

DFPS has a strong collaborative partnership with the Children's Commission which administers the Court Improvement Program grant and exists to improve the judicial handling of child welfare cases through systemic improvement; legal practice and process; attorney and judicial training; and data projects. The Children's Commission is a multi-disciplinary body comprised of judges, attorneys, DFPS executive leadership, non-profit foundation, and state bar leaders, as well as legislators, other elected officials, persons with lived experience, and child welfare stakeholders. The Children's Commission's Collaborative Council links to the larger stakeholder community, including kinship, foster families, attorneys, CASA, parent advocates, juvenile justice, child support, domestic violence, substance use, mental health and education stakeholders and representatives from the private provider community, children's advocacy centers, and many other child protection and child and family advocacy groups.

The Children's Commission collaborates with DFPS on almost every aspect of its work. Active Children's Commission membership includes the DFPS associate commissioners for CPS and Prevention and Early Intervention, DFPS staff on the Commission's Collaborative Council, and DFPS staff on each of the four Children's Commission standing committees.

DFPS maintained robust participation on the Statewide Collaborative on Trauma-Informed Care Implementation Task Force and workgroups. DFPS assisted with developing the recommended strategies in the 2019 report *Building a Trauma-Informed Child Welfare System: A Blueprint*. DFPS adopted definitions of "trauma" and "trauma-informed" by rule in 2021, and the task force Collaborative served as a stakeholder

feedback group for the rulemaking process. The definitions developed by the task force's Policy and Practice workgroup took into consideration existing and commonly used definitions and agreed on draft language taken primarily from the Substance Abuse and Mental Health Services Administration, but with additional language from National Child Traumatic Stress Network.

DFPS is also involved in establishing a statewide web portal to serve as a primary source of relevant information and training on trauma-informed care and practices. The task force's Statewide Collaborative on Trauma Informed Care's Information Sharing, Data, and Funding workgroup drafted a concept paper for task force review which identified key characteristics of a potential host organization to develop the Texas-specific site. The Children's Commission is partnering with the Texas Center for Child and Family Studies (TCCFS) to support implementation of trauma-informed court practices at several project court sites, known as the Trauma-Informed Court Project. This project will include collaboration with state and local DFPS staff to identify and implement trauma-informed court practices.

Additional activities are included below:

- The Children's Commission hosts a bi-weekly conference call with child welfare stakeholders and its Collaborative Council, including executive staff of CPS, Office of Court Administration, CASA, and many other stakeholders.
- DFPS and the Children's Commission review policy and procedures, share data and case analysis information, and explore opportunities to sponsor joint training activities at quarterly Children's Commission meetings.
- The Children's Commission's executive director has served and will continue to serve on the Texas CFSR Program Improvement Plan Team. The executive director also serves as a member of the Public Private Partnership, the steering committee that advises DFPS on the rollout of Community-Based Care.
- The Children's Commission partners with Office of Court Administration and DFPS to fund a senior data analyst position. The analyst accesses publicly available DFPS and court data and reviews these with an eye toward strengthening the court's continuous quality improvement process in DFPS cases.
- The Children's Commission partners with DFPS on priority issues for round table meetings which typically occur once or twice every year. The round table discussion includes experts from around Texas with a focus on identifying barriers and solutions to complex problems. Recent round table topics include normalcy, mediation, education in residential treatment centers, youth participation in court, and parental child safety placements. For fiscal year 2022, the round table topic was the DFPS' use of the Forensic Assessment Center Network Recommendations made because of each roundtable.
- The annual conference for child welfare judges hosted by the Children's Commission and the Texas Center for the Judiciary was held in-person on October 24, 2022. The conference featured a national keynote speaker on the intersection of children's mental health and child welfare, followed by 13 panel presentations which featured 46 speakers. Speakers included members of the judiciary, DFPS, Office of Court Administration, and youth with lived experience. Regional breakouts were convened

in-person for the first time in three years with judges and their local DFPS and SSCC staff meeting to review and discuss regional data following a DFPS panel on statewide data.

- The Children's Commission manages the Court Improvement Program and has provided attorney scholarships to DFPS attorneys to participate in CPS-related trainings, such as coordinating topics, speakers, and scholarships for DFPS attorneys for training when the Children's Commission collaborates with the Texas District and County Attorney Association to provide child welfare related continuing legal education. Additionally, the Children's Commission provides funding each year for the annual DFPS Attorney Conference. The Children's Commission and DFPS also collaborate on the Commission's Trial Skills Training curriculum which occurs once each year, and the DFPS regional litigation director along with a senior DFPS special litigation attorney are members of the Trial Skills Training Faculty and present at each of the Commission's twice-annual trainings.
- The Children's Commission supports the State/Tribal/Federal meetings held regularly throughout the year.

Permanency efforts in Texas continue to build on successful collaboration between DFPS, the Children's Commission, and other stakeholders. Roundtables, workgroups, and collaborative calls all have provided opportunities to strengthen permanency practice. Court reports provided by DFPS now include information regarding progress on the service plan and review parties' specific skills or knowledge acquired or learned stated in the service plan. The court report must evaluate whether the child's current educational placement is appropriate for meeting the child's academic needs, include a discharge plan for youth aged 16 years and older, address Preparation for Adult Living activities; a child's possession of their personal identification documents; and report on efforts made to identify an adoptive placement for the child if all parental rights have been terminated.

Based on the above information and input from stakeholders' brief assessments of strengths and concerns showing the effectiveness of the Case Review system are below.

#### Strengths:

- Collaboration and access to virtual and hybrid court hearings enable increased engagement from children and parents in the court process.
- Policies and procedures are in place to ensure Family and Child's Plans of Services are developed and updated timely and contain appropriate information on services and permanency for court review.
- DFPS utilizes Family Group Decision-Making meetings, when possible, to enhance family engagement in permanency planning.
- DFPS works collaboratively with the Children's Commission to improve processes for children and families within the court system.
- The Children's Commission, in partnership with the Texas Continuing Education Division of the State Bar of Texas, has created more attorney training opportunities on child welfare law, procedure, and practice.
- Court report templates for both permanency reviews and placement reviews have been updated to satisfy requirements from all recent legislative sessions.

### Concerns:

- Continued effort is needed to ensure all children attend their court hearings when appropriate. Areas of low staff retention can influence longer times to achieve permanency when cases have to be reassigned and new workers must become familiar with the family and children.

DFPS plans to continue working in partnership with stakeholders such as The Children's Commission and CASA to increase the number of children who attend their court hearings which will include efforts to expand the use of technology in this area. DFPS will also continue to participate in the annual judicial conferences to communicate and share ideas with judges who hear CPS cases. DFPS will continue to work with the child-placing agencies to successfully implement the Single Child's Plan of Service. This includes working with the ever-expanding Community-Based Care service providers.

### **3. Quality Assurance System Systemic Factor**

Through its Federal and Program Improvement Review division, CPS has institutionalized a statewide quality assurance process that mirrors the case review process used in the federal CFSR process. CFSR quality assurance specialists review cases for other issues related to intake and permanency, including ad hoc reviews as needed. The division includes Parental Child Safety Placement and FBSS Quality Assurance teams. More information on the Quality Assurance team and continuous quality improvement efforts are found in Section V, Program Support, Quality Assurance.

The DFPS Quality Assurance/Continuous Quality Improvement system has the required foundational administrative structure through the CPS Federal and Program Improvement Review division. This division conducts the following review: quarterly CFSR structured case, screened intake, open and closed cases parental child safety placement, FBSS, and ad hoc as requested

According to the federal IM 12-07 Continuous Quality Improvement in Title IV-B and IV-E Programs, there are five functional components of a continuous quality improvement system. DFPS and the federal Children's Bureau analyzed the Texas quality assurance system according to these components. The following is a summary.

**Component I: Foundational Administrative Structure.** The Texas DFPS is the single agency designated by the Governor and statute with the authority to administer child protective services consistent with Texas Family Code, Title 5, Subtitle E and the Texas Human Resource Code, Section [40.002](#). DFPS has several administrative structures in place to support this component. These include dedicated quality assurance staff for the child and family services, investigations, FBSS, and Title IV-E reviews. DFPS also has an Organizational Effectiveness team to focus on continuous quality improvement, as well as a Regional Systems Improvement division to support improvement efforts using data to direct decision-making.

DFPS implemented the Regional Systems Improvement team as a part of the Office of Data and Systems Improvement which reports to the data and systems improvement director and consists of one division administrator and 11 regional systems improvement specialists who work directly with regional management to embed continuous quality improvement within regional operations. Each regional director is assigned a regional systems improvement specialist, to help regional leadership take the "what" of the data universe, translate it into a useable format, determine "why" issues are occurring, and develop action plans that address "how" to improve. The Regional Systems Improvement division has four strategic goals:

1. Use knowledge of systems improvement and regional data to help local leaders strategically improve the functioning of their systems;
2. Embed continuous quality improvement into management operations and help leaders sustain changes made;
3. Work with regional management to prevent problems from becoming crises and crises from recurring; and
4. Work side-by-side with regional management during crises to ensure mechanisms to address immediate concerns do not create crises for other areas.

**Component II: Quality Data Collection.** DFPS has a variety of methods to collect data including a DFPS Data and Decision Support division that serves all DFPS programs. Its Management and Reporting Statistics team is responsible for the non-budget related reporting and statistical requirements of the agency. The team produces reports, analyses, and data sets for DFPS staff and external requestors and produces statistical data for publication in support of the DFPS mission, management, oversight, and performance measurement. The Management and Reporting Statistics team quality assures any data published by DFPS and is designated as the official source of all DFPS statistical reporting.

The Management Reporting and Statistics team compiles data from DFPS' five main Oracle databases (i.e., IMPACT, CLASS, DPEI, Reporting and FPS) to produce statistical reports. These reports make the data more accessible to users and help the program areas and other departments with decision-making and research. Additionally, as previously described, IMPACT provides required data to the federal government.

**Component III: Case Record Review Data and Process.** DFPS performs structured case reviews as described above, as well as regular case reviews for Title IV-E eligibility determinations, child fatalities and near fatalities, and reviews by supervisor and program director direct delivery staff.

**Component IV: Analysis and Dissemination of Quality Data.** Results from the case reviews are analyzed by dedicated quality assurance and permanency staff. Trends and data are shared with regional and DFPS State Office staff through receipt of completed case review guides, quarterly reports, and presentations. When trends indicate the need, coordination occurs with the CPS and Investigation Offices of Field. Trainings are developed, communication of reminders to staff are shared, resource guides created, and policies updated, as needed.

**Component V: Feedback to Stakeholders and Decision-makers and Adjustment of Programs and Process.** DFPS regularly collaborates with and provides feedback to a variety of internal and external stakeholders. The communication among these stakeholders is considered when reviewing current programs and making needed adjustments. External stakeholders with whom DFPS collaborates, as described in the collaboration section of this document, are used to exchange feedback, remove barriers, and adjust programs to strengthen the Texas child welfare system.

At this time, DFPS does not anticipate needing any additional training or technical assistance from the Children's Bureau or other partners for the areas of quality assurance or continuous quality improvement.

DFPS uses both an executive dashboard report and a CPS placemat report to consistently and quantitatively measure whether progress regarding safety, permanency, and well-being. The executive dashboard is available at the state and regional level; the data placemat is available state, region, and unit level. Both monthly reports are accessible to all DFPS staff. The executive dashboard contains key measures for each DFPS division and contains workforce data. The placemat assists in consistent review of key performance measures for each stage of service to target strategies for improvement and assess progress over time.

Continuous quality improvement is a foundation to programs within the Texas child welfare system. Dedicated staff are in place to support practice improvement. The CPS Federal and Program Improvement Review division consists of 26 quality assurance specialists, five quality assurance leaders, a program specialist, a team lead, and a division administrator, all of whom ultimately report to the CPS director of services. The division is comprised of two different teams; Child and Family Services Review (CFSR) and an ad hoc case review team. The CFSR Quality Assurance team conducts quarterly case reviews using the federal Child and Family Services Review On-Site Review Instrument; screened intake reviews based on policy; and special reviews involving children in DFPS conservatorship, as requested by DFPS leadership. Reviews conducted by the Parental Child Safety Placement Quality Assurance team include a sample of newly opened parental child safety placements and recently closed cases in which a parental child safety placement remained in place.

The CPS Federal and Program Improvement Review division helps to evaluate CPS effectiveness in providing for the safety, permanency, and well-being of children and families receiving services. This team coordinates with other staff in specific program areas and staff assigned as subject matter experts for all stages of service. The division contributes to developing, adapting, and continually improving tools for the qualitative and quantitative evaluation of CPS programs. The team also serves as a training resource for CPS.

The CFSR Quality Assurance team uses the most current federal review instrument in

the case review process consistently for all Texas regions. The team received training on the federal Round 4 CFSR Onsite Review Instrument and began using the instrument in 2023. DFPS uses an internal database for the CFSR reading instrument in which to store ratings for each case, stratify the cases by region and by stage of service, and monitor rating changes over time. DFPS is in the process of updating the internal database with the Round 4 instrument and requirements. DFPS will continue to use the internal database for case reviews that are not involved in Round 4 (for example, evaluation of TXPOP grant with case reads). DFPS has elected to use the federal OMS (Online Monitoring System) for Round 4 case reviews. DFPS will start using OMS in October 2023. There are at least 100 cases reviewed per quarter, composed of 60 foster care cases and 40 FBSS/alternative response cases, for a total of 400 CFSR structured case reviews annually. The reviews mirror the federal process, including the use of interviews with key stakeholders involved in the cases. The staff review, analyze, and evaluate data pertaining to the seven outcomes for Safety, Permanency, and Well-Being for children in Texas.

In the CFSR case review process, quality assurance specialists review IMPACT and external case file information and conduct stakeholder interviews. Reviewers must interview or attempt to interview key stakeholders for each case, as well as enough stakeholders to obtain an accurate view of the case. Reviewers interview parents, children aged 6 years and older who are developmentally able to understand the process, caseworkers and supervisors, foster parents or kinship caregivers, and anyone else who the reviewer feels may have additional information for the case review process. A minimum of two stakeholder interviews with no more than one being from internal staff attached to the case is required to keep the case in the sample. The division administrator must review all cases without sufficient key stakeholder interviews to approve or deny the case remaining in the sample.

Regional and statewide reports containing trend and data information from the CFSR case reviews are compiled quarterly and shared with staff through email, by posting the reports for all staff on the CPS Federal and Program Improvement Review division intranet page, and through presentations to regional staff by the quality assurance leaders. All CFSR cases reviewed are also presented individually to regional staff responsible for the case through case debriefings. The team shares quarterly results with CPS leadership and recommends practice improvement initiatives. Statewide structured case readings, outcome-related data analysis, reports of findings, case debriefings, and periodic focused training activities continue to be key quality improvement activities.

The CPS Federal and Program Improvement Review division incorporates continuous quality improvement into the quarterly case review process. As a result of receiving data, trends, and information from the case reviews in the form of reports, presentations, and production of improvement tips, here are examples of how various regions have taken the information and made positive changes to practice to improve outcomes to children and families:

- Including CFSR performance data in the regional business plans;
- Using CFSR item-specific data to help regional managers develop strategic efforts to

- improve children's movement towards permanency;
- Using CFSR data to guide staff on importance of increasing in-person visits with parents whose parental rights are intact and the child is DFPS permanent managing conservatorship;
  - Using CFSR data to guide staff on importance of requesting courtesy contacts for incarcerated parents located in other regions;
  - Conducting ongoing discussions with staff through case-specific debriefings on strategies for case work actions that will lead to improved outcomes;
  - Using special ad hoc case reviews to gain qualitative information to focus on a particular practice area of concern;
  - Developing strategic regional plans to address permanency delays;
  - Emphasizing re-evaluation of permanency goals by the time the child has been in care for five months and concurrent planning from the beginning of the case;
  - Actively engaging kinship staff earlier in cases when relatives are identified as caregivers and are seeing faster time to permanency with goals of guardianship and relative adoption;
  - Using the debriefing process with investigations and FBSS staff to assist with better case transitions between stages to engage families more quickly in safety services;
  - Developing a group supervision protocol to empower workers with better critical thinking skills and to help engage families earlier in the case; and
  - Incorporating the CFSR case debriefing process in the CPS University phase, to expose new caseworkers to the case review process and the expectations associated with it.

DFPS developed written policy and manuals as training for new Quality Assurance/Continuous Quality Improvement staff, as well as to help provide sustainability to the continuous quality improvement process. Many DFPS staff completed the Continuous Quality Improvement Academy sponsored by the federal Children's Bureau prior to this reporting period. DFPS has quality data collection through IMPACT which allows staff to input, collect, and extract data, as well as the staff capacity, including staff with the skill set and knowledge base, to collect and report the quantitative data needed for federal reports.

The centralization of data collection and management of the data warehouse contributes to the accuracy and ability to produce a data book, dashboards, and ad hoc reports upon request. DFPS has a significant number of data reports and legislative performance measures used historically to analyze performance related to safety, permanency, and well-being.

The DFPS Data and Decision Support division tests the efficacy of the data captured in IMPACT for various data warehouse reports and federal data submission. DFPS, IT runs the AFCARS extraction file monthly through the AFCARS validation tool. Items evaluated as being a concern due to data quality or data entry are addressed on an ongoing basis. ACF has confirmed with DFPS that the AFCARS and National Child Abuse and Neglect Data System data are reliable.

The CPS Federal and Program Improvement Review division has case review databases for CFSS reviews and screened intakes. These databases collect quantitative and qualitative data from the statewide case reviews conducted each quarter. The division also utilizes Survey Monkey to gather qualitative and quantitative data for the parental child safety placement, FBSS quality assurance reviews, and other ad hoc case reviews. These results are shared in written reports, data reports, and verbal presentations. Historical information from the case reviews is available to the program. Case review staff participate in inter-rater reliability exercises and procedures on an ongoing basis and before a new structured case review is implemented to ensure the consistency of the review process and data collection.

DFPS continued to work on the AFCARS Improvement Plan and consider how progress may be integrated into continuous quality improvement. DFPS looks for ways to utilize its Systems Improvement division to help collect and analyze qualitative and quantitative data regarding systemic factors (e.g., training of staff and resource parents, recruitment, and retention of foster parents, functioning of the case review system, and service array). DFPS uses data to develop training and evaluation of any new initiatives.

National Youth in Transition Database content is shared with youth and young adults in aging-out seminars, Youth Leadership Council Meetings, and other regional and statewide events and conferences. DFPS seeks feedback from youth and young adults during these venues about data and suggestions for program improvement. DFPS Preparation for Adult Living staff share National Youth in Transition Database information with Preparation for Adult Living contract providers during regular contractor meetings and caseworkers during regular unit meetings to obtain feedback and suggestions for program improvement. National Youth in Transition Database data has been shared with external partners working with older youth and young adults, including the Texas Workforce Commission, workforce solutions boards, judges, post-secondary institutions of higher learning, state legislators, and in collaborative workgroup meetings with community partners. National Youth in Transition Database survey data is posted on the DFPS public website and the Texas Youth Connection website. National Youth in Transition Database data collection and outcome reporting requirements adhere to federal guidelines and policy language is included in the Preparation for Adult Living staff performance evaluation.

DFPS continues to build capacity in the areas of analysis and dissemination of data, including with external stakeholders, as well as train staff and external stakeholders on the use of data and identify opportunities for stakeholders to be involved in data analysis. Since 2016, DFPS has produced the interactive Data Book, as described above and as available at: [http://www.dfps.state.tx.us/About\\_DFPS/Data\\_Book/default.asp](http://www.dfps.state.tx.us/About_DFPS/Data_Book/default.asp).

Data in the interactive Data Book is updated regularly and allows the general public to search and configure charts and graphs across many years of data. Complete data sets are available on the Texas Open Data Portal and updated regularly. As DFPS protects the privacy of both victims and perpetrators, there is no personal information contained in the statistics online, and all data has been summarized to the state, region, and county

levels. Information withheld for privacy is with regard to people (i.e., victims and perpetrators), not process such as investigations. In some circumstances, the data must be limited to ensure everyone's privacy is protected. Care is taken with sparsely populated counties where the number of people involved is small.

The DFPS FBSS State Office, Analytics and Evaluation division, CPS Office of Field, and CPS regional administration and staff are developing enhancements to the FBSS reading tool to improve FBSS case practice. Regional management and staff utilize examples provided in the readings to assist the field in understanding FBSS case readings and case practice expectations.

The CFSR Quality Assurance team assists in a variety of targeted continuous quality improvement reviews, including screened intake quality assurance reviews and other special case reviews as requested by CPS program. The team works collaboratively with staff from all program areas to respond to case review requests, develop special reviews, and determine the most effective way to share feedback with regional staff.

The division can supplement the CFSR instrument with additional program- specific case review questions and enter results into the internal database. This is a way for CPS program to further investigate an area with data for continuous quality improvement. Examples of targeted reviews during this fiscal year include: recent photograph of the child in conservatorship contained in the case record; visitation plans developed within 30 days of a child's entry into foster care; CANS Assessment was completed; information for children who exhibit Sexually Aggressive Behaviors included in common applications; whether Texas Health Steps checkup documentation contained within the child's Health Passport; and youth in care COVID-19 vaccination records and any barriers to receiving the vaccine. The results and data are pulled separately from the CFSR data and information, although each type of review produces case specific reports, uses aggregate data, and involves randomly selected cases. Trend reports are sent to staff involved for each case, as well as regional and statewide management. These reports share specific needs and strengths of each case and identify system-wide positive trends and areas to improve upon.

The CPS Federal and Program Improvement Review division currently reviews a sample of 500 screened intakes per quarter. These results are sent to the division administrator for statewide intake screeners, who manages the screener program. The sample of screened intakes is reviewed the month after they are closed. If the reviewer is concerned about the compromise of child safety by the closure decision, the report is immediately forwarded to the appropriate screener supervisor for review. The reviewer uses a case reading tool developed specifically for reviewing screened and closed intakes. Information is entered into the investigation quality assurance data base.

The Parent Child Safety Placement Quality Assurance team conducts reviews on a sample of newly opened parental child safety placements (i.e., 14-21 days after the parent voluntarily places a child in that setting) with at least one child under age 6. The team also reviews a sample of recently closed cases in which the case was closed with a

parental child safety placement remaining in place. The sample is selected from any case with the appropriate case closure codes closed within the last 30 days. Post-closure follows up reviews of cases where a parental child safety placement remains in place are conducted at 6 and 12 months after case closure. The number of parental child safety placements Parental Child Safety Placements has decreased significantly.

For the live and closed case reviews, the analysts provide the reading guide results to relevant staff assigned to the case, from the caseworker through to the program administrator. These reading guides provide positive feedback regarding the documentation, quality of the documented parent child safety placement assessments and tools completed. Policy violations and safety concerns are further documented with a copy and paste of the related policy and practice expectations documented. These review guides are also copied to the regional director for the opportunity to be aware of trends and resolve the identified concerns.

The CPS Federal and Program Improvement Review division has completed the following case reviews:

- For CFSR, 400 cases are reviewed annually; and
- Since September 1, 2022:
  - ▶ 242 cases have been reviewed on open parental child safety placements;
  - ▶ 31 cases have been reviewed where the case dosed with a parental child safety placement in place;
  - ▶ 121 caregivers have been contacted after case closed with a parental child safety placement;
  - ▶ 656 cases have been reviewed on closed alternative response cases;
  - ▶ 360 cases were reviewed for eligibility assistance;
  - ▶ 1,209 screened intakes were reviewed; and
  - ▶ 494 investigations and FBSS cases have been reviewed

Prior to initiating use of new quality assurances guides, inter-rater reliability exercises were conducted to promote consistent rating across all reviews. The division conducts periodic inter-rater reliability exercises within each team on an ongoing basis. A formal reliability exercise is conducted by the team on an annual basis through reading and rating the same cases separately and turning in their ratings for scoring. The team debriefs the cases and discusses any rating differences that may occur. New frequently asked questions developed from the trainings further support consistent ratings. Inter-rater reliability exercises provide staff with clarification on how to interpret the federal guide and DFPS policy, as well as apply ratings to the items and outcomes. The exercises enhance consistency in rating across all regions of the state and allows for cross-training of specialists.

Each quality assurance specialist has a portion of their sample reviewed by both their direct supervisor (i.e., quality assurance leader) and DFPS State Office program specialists for secondary review. The quality assurance leader selects completed case review guides from each quality assurance specialist to read quarterly and provides written feedback to the specialist on the ratings and justifications. The division's team lead

and program specialist also randomly select one case from each quality assurance specialist, as a third level of review, providing written feedback to the specialist and their quality assurance leader to ensure consistency of ratings. The CPS Federal and Program Improvement Review division works closely with the DFPS Systems Improvement division. Information from the case reads is shared with the regional systems improvement specialists, and the two teams work together to support regional improvement to practice and outcomes. Patterns or trends are noted and used to inform needed training, policy, or practice changes.

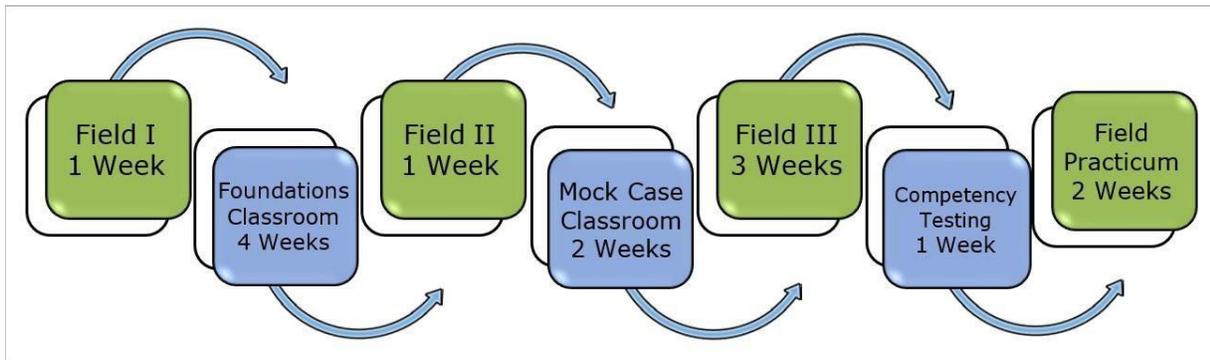
All division members provide training as requested for regional and DFPS State Office staff on an ongoing basis. These trainings can be specific to a unit or can include helping with program-specific conferences. The CPS Federal and Program Improvement Review division staff provide quality assurance and continuous quality improvement training at each CPS supervisor basic skills development class. The course takes the class through the CFSR instrument, the investigation and alternative response review instrument, and the overall quality assurance system, including reading and rating mock case scenarios together.

#### **4. Staff Training Systemic Factor**

DFPS has its own training division called the Center for Learning and Organizational Excellence (CLOE) which works with DFPS programs and divisions to provide training and professional development for the more than 12,000 DFPS staff. The CLOE mission is to equip those who "protect the unprotected", and it ensures workers are prepared to competently perform their assigned tasks.

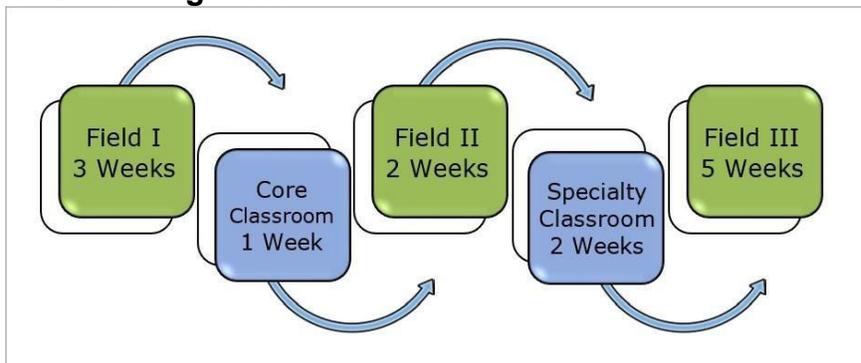
New caseworker training is called CPS/Child Protective Investigations (CPI) Professional Development. Training begins on the new caseworker's (called a protégé) first day and extends over the first nine months of their career. The model includes using mentors, revised classroom training and increased time spent on field-based specialty training (for investigations, FBSS, and conservatorship stages of service). The CPI training is 14 weeks in length. Rolled out in 2021, this model added testing requirements, updated scenarios, more impact training, demonstration of competencies, and hands-on experience. The model utilizes an individualized training plan and competency evaluation. This figure shows the integration of the CPI model classroom and field experience over a protégé's first 14 weeks of training.

#### **CPI Training Model**



Also rolled out in 2021, the CPS training model is 13 weeks in length and provides more hands-on training and specified training to the stage of service, as well as updated scenarios. This model will also provide more impact training. This figure shows the integration of the CPS model classroom and field experience over a protégé's first 13 weeks of training.

### CPS Training Model



The CPS training model is used statewide and was evaluated by the Lyndon B. Johnson School of Public Affairs at the University of Texas. Satisfaction surveys confirmed the evaluation findings. The evaluation concluded:

- CPS professional development-trained caseworkers are 18 percent less likely to leave within their first year than caseworkers trained under the old model. This results in 340 fewer caseworkers leaving DFPS, and an annual cost savings of about \$18 million.
- CPS professional development-trained investigators are more likely than their basic skills development counterparts to meet critical casework deadlines.

In addition to field and classroom training, both DFPS models have a statewide mentoring program to ensure protégés receive technical and personal support throughout their training. Staff report that the mentor model provides them with a better understanding of knowledge and skills. Key features of the program include:

- A one-to-one pairing of mentor and protégé, beginning as early as the protégé's first day;
- A shared caseload, where the protégé works real cases and gradually assumes more responsibility;

- A realistic job preview, where the protégé adopts the same on-call schedule as the mentor; and
- Mentors are compensated with a monthly stipend.

### **Management Training**

Agency success depends heavily on supervisors' ability to become proficient in their new responsibilities, including an increased level of decision-making, moving toward a field-based learning model for staff training, and safety and risk assessment tools. Effective supervisors are also critical to improving staff retention. DFPS selected strengths-based supervision as the first initiative to strengthen the skills of supervisors. Through a combination of classroom sessions and group coaching led by management (i.e., program directors and administrators), the curriculum provides practical and emotional support and highlights the importance of clinical supervision essential to child welfare work. CLOE offers the strengths-based supervision course in all regions. Quality management and distinctive organizational performance ultimately results in improved services to and outcomes for vulnerable Texans served by DFPS. Along this continuum, staff at each stage engages in a series of courses to develop skills in each of the eight competencies identified as essential for all DFPS managers: collaboration; communication; cultural competence; decision making; professional development of others and self; integrity; managing change; and strategic thinking. In 2021, supervisor basic skills development was revamped and renamed *Foundations of CPS/CPI Supervision*. Updated information on applications and tools, data warehouse reports, IMPACT, and scenarios were enhanced. This course is required for new supervisors. There are a number of specific courses required for supervisor development.

### **Certification**

There are three levels of specialist certification: specialist, advanced specialist, and senior advanced specialist. All levels, as well as supervisors, must meet specific tenure, training, and performance requirements within their program to be eligible for certification. CLOE is equipped with both an online learning station and registrar section. The Learning Station is a site where employees have access to online courses including webinars, course evaluations, and course completion certificates. CLOE registrars maintain all internal training records for DFPS employees and external training, upon request and per policy.

A measure for on-going training is *DFPS Certification: Climb the Ladder*. For certification, caseworkers are required to attend and successfully complete continuing education courses. Certificates are provided at the time of successful completion of each course, and supervisors then are required to sign off on the certification completion. Additionally, supervisors are required to assess the professional development and growth of their staff throughout the work history and training processes. Data for completion of CPS/CPI professional development and all on-going training is stored in the CAPP Systems on each caseworker's training transcript. In 2021, CPI added transfer of learning activities. These show demonstration of competencies required for certification.

DFPS makes trainings available to external stakeholders, including CASA, faith-based

community members, child-placing agency staff, members of the judiciary, and community leaders. DFPS has an agreement in place with the three federally recognized Tribes in Texas that allows Tribal representatives to attend trainings across the state. DFPS routinely invites external stakeholders to participate in trainings when opportunities become available. External stakeholders may request to attend any training listed in the CLOE catalog. DFPS also strives to seek input from external stakeholders when developing curriculum, such as *The Inside Scoop on the Indian Child Welfare Act*.

All CPS/CPI training curriculums and web-based trainings are reviewed and approved by the relevant program. These trainings meet DFPS accessibility standards and are Americans with Disabilities Act compliant. Online training is reviewed for functionality and best practices; and tested against accessibility, usability, and network/server performance standards. When online training is deployed, CLOE can monitor training completion and update stakeholders with compliance rates. For newly developed classroom training, CLOE hosts Tabletop reviews of the training for stakeholders and/or DFPS State Office prior to deploying the training to ensure quality of curriculum, content, and delivery.

Training compliance coordinators monitor newly hired staff completion of assessments and tasks included their professional development program. These participants and their supervisors are prompted to attend to incomplete assignments in near real time to ensure timely completion of requirements. Academy managers monitor and assess the delivery of training on a quarterly basis with each trainer. Results are shared with trainers and CLOE management. These results are used to coach and support training delivery and make improvements to ongoing trainings as needed. Training compliance coordinators monitor case assignability and ensure all training requirements in classroom, computer-based trainings, individualized training plans, and competency evaluations have been satisfied and reflected on the protégé's transcript.

The CLOE quality assurance specialist analyzes end-of-course evaluations and creates reports about overall course and instructor quality. Quality scores created from these reports are monitored for compliance within quality standards. Scores below quality standards trigger additional analysis designed to uncover the cause of the poor scores. The development manager and curriculum developers are enlisted in improving curriculum needing revision or updates. Academy managers are enlisted in improving instructor performance for those that need to improve.

Based on the above information and input from stakeholders, as well as legislative input for curriculum development, a brief assessment of strengths showing the effectiveness of the staff training system are below.

#### Strengths:

- Training is offered in a variety of ways, including an extended period of on-the-job training between the protégée and the mentor, in the classroom, and through distance learning.
- Training includes initial training and ongoing training.

- Training includes both program specific and cross-program topics.
- Feedback suggests the most important aspects of CPS/CPI professional development training are the experiential activities that provide opportunities to practice skills and apply knowledge to authentic work situations.
- Training is developed collaboratively with agency and external partners.
- Conference training is also supported to build capacity (e.g., the annual Crimes Against Children conferences, annual Child Abuse Summits, and others).

CPS/CPI conducted statewide focus groups on the CPD Training Model and used a Statewide Training Council to focus on areas needing improvement. This feedback was incorporated into the new training models. Additionally, CPS/CPI continues to provide support through training for new supervisors and program directors.

The following program improvement plan goal addresses Foster and Adoptive Home Licensing, Recruitment, and Retention Systemic Factor.

### **Foster and Adoptive Parent Training**

All caregivers, except those designated as kinship caregivers, must complete a maximum 35 hours of competency-based pre-service training before becoming verified to foster and/or approved to adopt. The *Parent Resources for Information Development Education* (PRIDE) curriculum is the prescribed training used for DFPS foster and adoptive home applicants. This curriculum is a competency-based training program that meets a majority of the pre-service training requirements specified in Minimum Standards. DFPS may exceed 35 hours of pre-service training based on the needs of the child placed, including training regarding treatment of children with complex medical needs, sexual victimization, sexual aggression, emotional disorders, intellectual and developmental disabilities; the treatment of victims of human trafficking, and any other situation DFPS determines would require additional training.

The PRIDE model of practice is built upon five core competency categories developed through comprehensive role analysis:

1. Protecting and nurturing children;
2. Meeting children's developmental needs and addressing their delays;
3. Supporting relationships between children and their families;
4. Providing trauma-informed care;
5. Connecting children to safe, nurturing relationships intended to last a lifetime (permanency); and
6. Working as a member of a professional team.

Since September 1, 2022, DFPS has held 28 PRIDE foster/adoptive parenting classes with 361 prospective foster/adoptive parents in attendance. In addition, DFPS holds training for Foster/Adoptive staff and other child-placing agency staff on the PRIDE training model. Since September 1, 2022, three PRIDE Train-the-Trainer classes were held with 23 participants.

DFPS is currently editing the National Training and Development Curriculum to replace PRIDE as the pre-service training. The National Training and Development Curriculum is a new curriculum based on research and input from experts, families who have experience with fostering or adopting children, and former foster and adoptive youth. The National Training and Development Curriculum is funded through a five-year cooperative agreement with the United States Department of Health and Human Services, ACF, Children's Bureau, and Spaulding for Children. The National Training and Development Curriculum became available to all child-placing agencies in June 2022, and DFPS will roll out the DFPS-specific curriculum developed for Texas in June 2023.

Training of prospective foster parents is required by the United States Department of Health and Human Services, through the *Minimum Standards and Guidelines for Child-Placing Agencies*. These standards require all foster parents to receive an orientation and additional training in areas, such as the developmental stages of children, fostering self-esteem of children, constructive guidance and discipline of children, strategies and techniques for monitoring and working with children, and normalcy. Other required pre-service training topics include trauma-informed care; different roles of caregivers; measures to prevent, identify, treat, and report suspected occurrences of child abuse (including sexual abuse), neglect, and exploitation; emergency procedures, such as emergencies related to weather, volatile persons, or severe injury or illness of a child or adult; and preventing the spread of communicable diseases.

Foster parents are also required to complete cardiopulmonary resuscitation and first aid training. Prospective foster and adoptive parents caring for children under 2 years of age must be trained in Shaken Baby Syndrome, Sudden Infant Death Syndrome, and early childhood brain development. Foster and adoptive parents caring for children taking psychotropic medications must be trained on the administration of psychotropic medications.

Child-placing agencies require each caregiver to complete a minimum of eight hours of trauma-informed care training before being the only caregiver responsible for a child. Training must include at least one of the DFPS-approved trauma-informed care trainings, a component on adverse child experiences, and training and resources related to prevention and management of Secondary Traumatic Stress (Compassion Fatigue).

Contractors must ensure the completion of an annual refresher of trauma-informed care training by their foster parents. This training must be at least two-hours, and providers can use the approved DFPS online training or their own curriculum to build upon the training already received. Each foster family's ongoing training hours are monitored by the assigned foster/adoption home development caseworker or child-placing agency case manager. DFPS basic foster family homes are required to complete two hours of pre-service trauma-informed care training and two hours of an annual refresher training.

## **5. Service Array Systemic Factor**

DFPS has a comprehensive service array that extends to all regions and counties across the State. The state has in place methods that assess the strengths and needs of all

children and families to determine the services necessary to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency. The family-focused culture collaborates with families to build on their strengths in developing individualized family plans that include the types of supportive resources they identify as necessary to care for their children within their own homes and communities.

The DFPS Purchased Client Services division assists in purchasing direct services for CPS children and families served by DFPS. Purchased Client Services plans for services, assists with the procurement of services, manages and monitors contracts, and resolves contracting issues. Purchased Client Services includes the Regional Contracts, Residential Contracts, Prevention and Early Intervention Contracts, and Contract Performance divisions. DFPS has a strong collaborative relationship with residential providers who serve children in care and developed a formal workgroup called the Committee on Advancing Residential Practices that regularly meets to strategize how best to improve outcomes and discuss service needs.

Regionally, County Commissioners' Court may appoint a child welfare board, composed of stakeholders within the community who operate within the local child welfare system to provide services for children and their families and coordinates with DFPS in the use of federal, state, and local funds for these services. Counties may appropriate local funds for the administration of its county child welfare board.

Texas has a statewide healthcare delivery model for children in foster care. This program, known as STAR Health, was implemented in April 2008 and recently reprocured. Under the managed care model, HHSC contracts with managed care organizations, also known as health plans, and pays them a monthly amount to coordinate and reimburse providers for health services for Medicaid members enrolled in their health plan. Each child in DFPS conservatorship receives Medicaid services through Superior Health Plan, the managed care organization for the STAR Health program, which include medical and behavioral health, dental, vision, and pharmacy benefits.

HHSC provides contract oversight to ensure STAR Health provides access to covered services on a timely basis for children in foster care and monitors performance on quality measures to improve the health outcomes and quality of life for children receiving benefits in the STAR Health program. In compliance with federal regulations, HHSC provides contracts with an external quality review organization to monitor quality of care provided by Medicaid managed care organizations. The reports from the external quality review organization are used to hold the STAR Health program accountable and develop continuous improvement in the quality of care for healthcare provided to children in foster care.

The CPS Medical Services division contains two geographically dispersed teams with nurse consultants and well-being specialists covering all regions. This team provides guidance and support to field staff to ensure children in foster care have their medical needs met. They act as liaisons between caseworkers and STAR Health. Additional

members of the Medical Services team assist field staff in managing authorizations and denials of healthcare services and troubleshooting complex medical and behavioral health cases. CPS also has a board-certified pediatrician serving as a DFPS medical director to provide support and consultation for the Medical Services division, as well as other divisions and direct delivery staff.

The DFPS Behavioral Health Services division provides staff training and education on behavioral health services including the CAN) assessment, information on trauma-informed care, mental health resources, and substance use disorder treatment available throughout the state. The division provides contact information for the local mental health authorities and Outreach, Screening, Assessment and Referral (OSAR) centers who offer a wide array of services and act as a liaison to services when needed. DFPS assists in service planning for youth with complex mental health needs and/or substance use disorders, individualizing the service plans based on the needs of the child or youth. CPS Medical and Behavioral Health services team members are certified in Mental Health First Aid training, and certification expansion is planned throughout the CPI Best Practice team.

The Texas child welfare system continues to be challenged with meeting the needs of children and youth in conservatorship due to their parents' inability to access sufficient services to meet their behavioral health needs. Services are limited for children who have complex behavioral health and medical health needs, particularly in the youth's home community. Clinical coordinators, specialized staff assigned to assist with youth who have complex needs and for whom placements and services are difficult to obtain resulting in DFPS-supervised settings, are dedicated to serving the needs of these youth and building capacity.

The DFPS PEI division assists communities in identifying, developing, and delivering high quality prevention and early intervention programs. These programs are designed to promote opportunities for partnerships with families that capitalize on the strengths of parents and children together to build healthy families and resilient communities. In fiscal year 2022, PEI served 60,077 unique children, youth, and families through evidence-based home visiting programs, parent education, counseling, and support services. Nearly all (97.4 percent) of children and youth remained safe while enrolled in PEI services, and their parents who were at risk of child abuse and neglect did not become confirmed perpetrators in a DFPS abuse or neglect investigation. PEI programs also provided mentoring, youth-employment programs, career preparation, and alternative recreational activities to prevent delinquency and improve overall youth outcomes. A total of 97.3 percent of youth between age 10 and 16 years old who were served by PEI-funded programs did not enter the juvenile justice system in fiscal year 2022 (Services to At-Risk Youth & Community Youth Development).

In fiscal year 2021, PEI worked with many stakeholders across the state to develop a five-year strategic plan, as required by Texas statute. The plan includes seven objectives designed to support the creation of safe, stable, and nurturing environments for Texas children, youth, families, and communities. These objectives are intentionally broad to allow for continued partnership and collaboration to meet the needs of Texas communities

over the next five years. PEI strategic plan is found at: [Prevention and Early Intervention Five Year Strategic Plan, Fiscal Years 2022-2026\(state.tx.us\)](https://www.dfps.state.tx.us/About/DFPS/Reports_and_Presentations/PEI/documents/2022/2022-09-01_FY2022_PEI_Strategic_Plan_Update.pdf)

A progress report on implementation of the first year of the PEI five-year strategic plan was released in September 2021 at: [https://www.dfps.texas.gov/About/DFPS/Reports\\_and\\_Presentations/PEI/documents/2022/2022-09-01\\_FY2022\\_PEI\\_Strategic\\_Plan\\_Update.pdf](https://www.dfps.texas.gov/About/DFPS/Reports_and_Presentations/PEI/documents/2022/2022-09-01_FY2022_PEI_Strategic_Plan_Update.pdf)

Each fiscal year, PEI publishes a business plan that outlines the activities it will focus on during the upcoming fiscal year to continue advancing prevention in Texas and reaching the goals outlined in the PEI five-year strategic plan. A copy of the fiscal year 2021 PEI business plan, specific to services during the current reporting period, is at: [https://www.dfps.texas.gov/About/DFPS/Reports\\_and\\_Presentations/PEI/documents/2022/2022-11-17\\_PEI\\_FY23\\_Business\\_Plan.pdf](https://www.dfps.texas.gov/About/DFPS/Reports_and_Presentations/PEI/documents/2022/2022-11-17_PEI_FY23_Business_Plan.pdf)

Service array is also addressed through the following initiatives and strategies outlined further within this annual report:

- Alternative Response;
- Strengthened FBSS;
- Transitional Living Services Program;
- Effective prevention services (See Strategy 1.2b);
- Procurement of services by community-based entities (See Objective 2.5);
- Provision of direct services and support to relative or kinship caregivers (See Strategy 2.3a);
- Educational support services (See Strategy 3.2a);
- Child abuse/neglect and juvenile delinquency prevention services to children, youth, and families via an array of programs that span the prevention continuum (See Strategy 1.1a);
- Service delivery to families transitioning from conservatorship to family reunification (See Strategy 2.1);
- Service planning and delivery to meet the needs of the complete family (See Strategies 1.6a, 1.6b);
- Collaboration with other Texas agencies whose services promote healthy Texas families and are available to families served by DFPS (See Strategy 1.1b);
- Collaboration with other Texas agencies to improve the continuity of care and access to needed medical and behavioral health care for children served by DFPS (See Strategy 3.1c);
- Services and supports to youth aging-out or have aged-out of foster care to help them to successfully achieve self-sufficiency and permanency (See Strategy 2.4e);
- Continued collaboration with HHSC, STAR Health, managed care contractors, residential providers, and staff to monitor and improve appropriate medical services to children in DFPS care (See Strategy 3.1c);
- Substance abuse services provided through a network of service providers through HHSC and Texas Department of State Health Services contracts;
- Behavioral health services provided through a network of local mental and behavioral

health authorities, provided by HHSC and the Texas Department of State Health Services; and

- Collaborative community partnerships with stakeholder groups and the faith community that increase efforts among service providers to ensure continuity of care for a child or youth while receiving needed services (See Strategy 2.5b).

For fiscal year 2022, there were 3,263 DFPS Client Services Contracts, including:

- 41 DFPS State Office managed contracts;
- 1,118 CPS managed contracts;
- 1,966 residential child-care managed contracts with 426 distinct residential providers);
- 5 Community-Based Care (formerly known as Foster Care Redesign) SSCC contracts; and
- 133 Prevention and Early Intervention grants.

**Average Number of Children and Families Receiving Purchased Services  
per Month Fiscal Year 2022**

Region	Adults	Children	Total Clients	Children Living at Home	Children Living in Substitute Care	Children Post Adoption
01	909.1	498.3	1,407.4	164.7	338.1	8.9
02	702.2	379.3	1,081.5	150.3	237.1	5.8
03	3,316.3	1,672.6	4,988.8	512.2	1,121.8	86.2
04	1,125.1	419.8	1,544.9	185.3	240.9	5.5
05	626.4	280.8	907.3	76.8	208.1	3.5
06	2,366.3	1,421.0	3,787.3	513.7	947.8	35.7
07	2,413.8	1,283.0	3,696.8	516.6	797.3	13.8
08	2,442.9	1,134.7	3,577.6	432.0	734.7	14.1
09	534	213.8	747.8	58.1	156.7	5.1
10	338.3	244.3	582.6	129.2	122.7	1.7
11	1,548.3	536.3	2,084.7	165.5	391.3	1.0
<b>Total</b>	<b>16,322.8</b>	<b>8,084.1</b>	<b>24,406.9</b>	<b>2,904.3</b>	<b>5,296.4</b>	<b>181.2</b>
<b>Total</b>	<b>22,871.3</b>	<b>9,283.9</b>	<b>32,155.2</b>	<b>3,827.9</b>	<b>5,647.1</b>	<b>130.6</b>

Source: DFPS 2022 Data Book

DFPS further assesses services to families through the quarterly CFSR case reviews: Well-Being Outcomes: (1) Families have enhanced capacity to provide for their children's needs; (2) Children receive appropriate services to meet their educational needs; and (3) Children receive adequate services to meet their physical and mental health needs. CFSR case reviews are described in the systemic factor above.

The following is statewide data from the Federal Onsite CFSR (April-September 2016) and the last four completed Texas CFSR case reviews for CFSR items related to service delivery.

CFSR Item	Onsite Review 2016	Q4-FY22	Q1-FY23	Q2-FY23	Q3-FY23
Item 2- Services to family to protect children in the home and prevent removal	60.0%	60%	69.6%	77.8%	68%
Item 12A - Needs Assessment of Children	92.0%	83%	78%	85%	83%
Item 12B - Needs Assessment of Parents	53.0%	48.8%	41.6%	59.3%	52.3%
Item 12C - Needs Assessment of Foster Parents/Caregivers	94.0%	96.6%	96.4%	100%	98.2%
Item 16 - Educational Needs of the Child	91.0%	93.1%	88.1%	94.4%	96.3%
Item 17 - Physical Health of the Child	88.0%	81.4%	72.9%	87.7%	86.4%
Item 18 - Mental/Behavioral Health of the Child	79.0%	78.9%	76.6%	86.2%	86.3%

CFSR case review data shows that Texas does well in providing services to children and caregivers, but typically needs improvement in services to parents, particularly absent parents. Texas has seen an improvement in the data for the parent-related items and anticipates continued improvement in this area moving forward.

Based on the above data, trends identified through CFSR case reviews and input from stakeholders, brief assessments of strengths showing the effectiveness of the service array system are listed below.

Strengths:

- CPS incorporates specialist positions that impact and enhance the direct delivery of services to children and families. These include:
  - ▶ Family group decision-making and circles of support specialists ensure individualized and family-involved case planning;
  - ▶ Developmental disability specialists identify special medical, mental, and physical needs of children in and out of the home;
  - ▶ Education specialists assist with accessing specialized services and meeting the educational needs of children in and out of the home;
  - ▶ Well-being and behavioral health specialists liaise between the STAR Health representatives and DFPS regional staff for awareness of services and facilitation of access to the medical and behavioral health services to foster children;
  - ▶ Kinship specialists support kinship caregivers of children in DFPS conservatorship

with help gaining access to community activities, services, and resources designed to preserve and strengthen the kinship placement;

- ▶ Nurse consultants provide consultation, technical assistance, and training to staff, foster parents, residential childcare providers, and other organizations; and
- ▶ Youth specialists raise the voice of youth and advocate for youth in foster care connecting them with resources, services and assisting in their transition out of foster care.
- Community stakeholders, particularly faith-based, support in creative use and provision of community resources has increased.
- STAR Health offers support services, such as safe transportation of children with primary medical needs. The service includes transportation of a child with primary medical needs in an ambulance or in a car with the support of a nurse during a change between placements as well as disassembly and re-assembly of durable medical equipment provider during the transition.
- DFPS provides daycare services to assist with child protection, socialization, and support of caregivers.

#### Concerns:

- Some regions experience an inadequate number of providers to offer services in languages other than English.
- Some regions experience long waits or do not have a uniformly available option across the state for substance abuse services that treat parents with their children.
- Some rural areas of the state lack services available within proximity of where the families reside.
- Testing for certain substances, such as synthetic marijuana, bath salts, or certain opiates, is cost prohibitive, making accurate assessment of family functioning more difficult.
- Some rural areas of the state lack sufficient providers to treat children with a combination of mental health and substance use issues.
- Resources to address adult mental health issues are needed. DFPS has evaluation and treatment contracts, but currently no contract that would assist with payment for needed prescriptions.

Families involved with CPS are provided direct delivery and purchased services based on the level of risk, their needs, and local resources. DFPS continually seeks to expand support services through direct delivery staff, contracted providers, and communities.

Please see further service array information contained within this annual report that addresses DFPS services offered to children and families within family preservation, family support, family reunification, and adoption promotion and support services.

#### **6. Agency Response to the Community Systemic Factor**

Building community relationships and partnerships is an integral part of the work of DFPS and are critical to providing needed services and supports to the children and families served by DFPS. The agency actively engages with community partners to increase communication, understanding, and collaboration strategies across service systems to

strengthen families, as well as to enrich communities.

DFPS works with communities in a unified and comprehensive approach to plan, develop and administer prevention and early intervention services.

- The PEI five-year strategic plan seeks to establish PEI as a statewide hub for communication, knowledge sharing, and assistance for stakeholders engaged in strengthening children and families in their communities. PEI leads multiple cross-agency initiatives and participates in various committees, coalitions, advisory boards, and teams across the state to continue to ensure PEI's work is rooted in and supported by communities.
- PEI partners with the University of Texas Health Science System to release community maltreatment risk maps. These maps provide PEI a new opportunity to utilize state-of-the-art risk mapping and geographically based risk and resiliency models to identify and allocate resources within communities of highest need. In fiscal year 2022, PEI released an updated version of the community risk maps with an all-new interactive website. Both ZIP Code and county level data on risk and resilience are available, as well as detailed, accessible descriptions of the various metrics used to assess risk in different age cohorts. Updated maps are located at <https://www.maltreatment-risk.txsafebabies.org/>. PEI will continue using these maps to provide support to communities in preventing child maltreatment by helping families before they are in crisis.
- PEI's work with the Children's Trust Fund Alliance Parent Partnership Fellowship Pilot Project ended in March 2023. With guidance from the project, PEI has established its own Parent Advisory Committee. PEI continues to participate in the Children's Bureau's Thriving Families, Safer Children – Round Two cohort. Both of these programs are invested in lifting up the voices of persons with lived experience, thinking differently about our processes, and sharing power with those who have experience in our systems to create the conditions for strong and thriving families and communities where children are free from harm.

DFPS collaborates with faith-based organizations and community partners statewide to serve children and families who are involved or at risk of becoming involved with the DFPS system. DFPS provides local churches with data on the needs of children, youth, and families in their area so these congregations can determine the type of ministry they want to develop. Churches may get involved in a number of ways, ranging from prevention to permanency. Collaborative activities with faith-based communities include the following:

- DFPS focuses on strengthening existing partnerships and establishing new relationships to create networks of support. DFPS continues to increase capacity by expanding the volunteer workforce supporting the overall mission and strategic objectives specific around direct delivery.
- DFPS partners with Care Portal, a web-based tool that allows CPS and CPI staff to connect with faith communities to clearly identify and meet the needs of children and families.
- DFPS continues to expand bed ministry efforts throughout the state to ensure all children in care have a bed to sleep on and no children sleep on floors.

- DFPS continues to collaborate with the Office of the Governor on strategies to address child sex trafficking and labor trafficking in Texas, including an invitation to all faith communities to join in a day of prayer for victims.

There are three federally recognized American Indian Tribes in Texas: The Kickapoo Traditional Tribe of Texas, the Ysleta Del Sur Pueblo/Tigua Tribe, and the Alabama-Coushatta Tribe of Texas. DFPS participates in biannual state/tribal meetings with tribal, state, and federal representatives, and external stakeholders. Each entity shares the responsibility for hosting a meeting, and the events are held at multiple locations in Texas. Resources, training, and services are shared. More information is available in the section addressing services to the Tribes.

DFPS works diligently to build and strengthen alliances and networks at all levels and continues to utilize all available community support to provide for the safety, well-being, and permanency of Texas children. DFPS conducted a robust stakeholder engagement effort regarding the federal Family First Prevention and Services Act (FFPSA). DFPS met with stakeholder groups in communities across the state to explain the legislation and to get community input on the shared vision of improving outcomes for children.

Although many organizations and stakeholders across the state share a commitment to improving the Texas child welfare system, until the Supreme Court of Texas created the Children's Commission, no multidisciplinary entity existed at such a high level to coordinate and implement comprehensive efforts to improve courts hearing child welfare cases. The Children's Commission works toward ensuring better outcomes for children and families involved in the Texas child welfare system.

The Children's Commission assists courts with judicial handling of child welfare cases through its Systems Improvement, Legal Practice and Process, Training, and Data committees. The Children's Commission also administers the federal Court Improvement Program for Texas. The formal Children's Commission is composed of a high-level membership from the executive, judicial, and legislative branches of Texas government, along with child welfare partners in the non-profit and private sectors. The Children's Commission links to the larger stakeholder community through a more than 40-member Collaborative Council, comprised of former foster youth, foster families, attorneys, CASA, and parent advocates. Representatives from institutions of juvenile justice, mental health and education are also included, as well as representatives from the private provider community, children's advocacy centers, and many other child protection and child and family advocacy groups.

The Children's Justice Act awarded funds to Texas to improve its child welfare system, primarily focused on assessment, investigation, and prosecution of child abuse and neglect. Texas maintains a multidisciplinary Children's Justice Act Task Force to oversee program activities, comprised of professionals with knowledge of and experience with the child protection and criminal justice systems and chaired by the director of the Collin County Children's Advocacy Center. At a minimum, the Texas Children's Justice Act Task Force consists of 25 members, including attorneys, CASA, DFPS, parent and victim

representatives, mental and physical health professionals, judges, law enforcement, and professionals experienced working with homeless children and youth and those with developmental disabilities. Every three years, the task force conducts a comprehensive review and evaluation of law, policy, and the handling of cases of child abuse and neglect and makes policy and training recommendations for systemic improvements. Recipients of grants during this reporting period include Children's Advocacy Centers of Texas, Texas Municipal Police Association, Sam Houston State University, the Texas Department of State Health Services, Harris County Institute of Forensic Science, SAFE Alliance, and Texas Legal Service Center.

DFPS enters into a memorandum of understanding (MOU) with a community agency for a variety of purposes, including the exchange of information, sharing of resources, or interaction with a local entity, such as a child advocacy center. A MOU is a non-financial agreement between DFPS and one or more parties for a specific purpose. DFPS has active MOUs with agencies such as Child Advocacy Centers, CASA, crisis centers, the Texas Juvenile Justice Department, universities, and other agencies who serve clients with drug/alcohol, mental health, and domestic violence needs.

Agency response to the community is also addressed through the following initiatives and strategies outlined further within this annual report:

- Parent Collaboration Group and Regional Parent Support Groups (See Strategy 2.2g);
- Kinship Collaboration Group and Regional Kinship Support Groups (See Strategy 2.3b);
- Locally based projects that enhance resources and services for families and children through interagency collaboration that strengthens the community's responsibility to support families and prevent abuse and neglect of children (See Strategy 1.2b);
- Fatherhood Initiative (See Strategy 2.2g);
- Coordinated PEI and CPS services to enhance effectiveness of prevention efforts (See Strategy 1.1b);
- Services and partnerships that improve outcomes for youth exiting foster care for adult living (See Strategies 2.4e, 2.4f);
- Cross-systems intra-agency reform model to reduce disproportionality in CPS (See Strategy 6.2a);
- Collaboration with faith-based communities for foster and adoptive families and support services for those families (See Strategy 2.6b);
- Collaboration with other state agencies whose services promote healthy Texas families (See Strategy 1.1b);
- Community-Based Care to promote a community-based approach to service coordination and delivery to children and families, and enhance opportunities for collaboration between both DFPS and other stakeholders (See Objective 2.5);
- Collaboration with judicial and other stakeholders to reduce barriers to permanency (See Strategy 2.1c);
- Use of feedback from youth who have been involved with CPS to improve policy and service delivery strategies through the Youth Leadership Council, youth specialists, and Regional Youth Councils (See Strategy 2.4g);
- Texas Council of Child Welfare Boards, providing a statewide network for regional and

local child welfare boards to support DFPS efforts to normalize the experience of children in the foster care system and to connect them to their communities; and

- Community-Based Child Abuse Prevention program, building community awareness of prevention services, strengthening community and parental involvement in child abuse prevention efforts, and encouraging families to use the services available to them.

#### Data:

- In fiscal year 2022, there were 135 Rainbow Rooms in 118 counties. DFPS faith-based and community engagement staff served 3,836 clients and 12,204 family members through the Rainbow Rooms. In total, the Rainbow Rooms served an estimated 60,000 children and youth across the state.
- In fiscal year 2022, a total of 23,035 families received services through the Community-Based Child Abuse Prevention funded programs.
  - Each year more than 67,558 children receive critical services at one of the 71 children's advocacy centers in Texas.

Based on the above data and input from stakeholders' brief assessments of strengths showing the effectiveness of the system are below.

#### Strengths:

- The DFPS Faith-Based and Community Engagement division has specialists in each region to coordinate community-based and public awareness activities. These staff aid in the development of community boards, identify resources, and collaborate with faith communities, volunteers, local judicial and legal stakeholders, law enforcement, medical entities, and community agencies to strengthen the quality of services provided to CPS children and families.
- The DFPS Faith-Based and Community Engagement division engages volunteers from the community to work in offices with caseworkers, directly with clients, or on community boards or groups. Volunteers help clients with clothing and supplies, life skills, transportation, companionship, and other areas as needed.
- DFPS is raising awareness about child abuse, as it provides schools, hospitals, day care facilities and other community organizations with posters to display and practice tip cards to distribute upon request and free of charge. Awareness is also addressed each April during Child Abuse Prevention Month, each May during Foster Care Month, and each November during Adoption Month at events all over Texas.
- PEI continues promoting the public awareness campaign GetParentingTips.com. The site provides up-to-date tips, articles, information, and resources for handling the challenges of parenting, managing stress and keeping children safe and healthy at all stages of development, from prenatal to adolescent years. PEI and DFPS Communications continued to develop video resources for parents on the GetParentingTips.com platform with topics, such as coparenting tips for parents of teens and helping children deal with their emotions. PEI has also launched the Texas Parent Helpline to provide further assistance, support, and resources for parents who want to talk about their concerns and learn about assistance available in the community.

- Rainbow Rooms are effective in meeting critical needs of abused and neglected children by supplying car seats, clothing, shoes, underwear, baby formula, school supplies, and safety and hygiene items to children entering foster or relative care and children receiving services at home.
- The Adopt-a-Caseworker Program connects CPS caseworkers with people, churches, businesses, and organizations to help meet needs of children involved with CPS.
- Ten Texas Heart Galleries help children achieve permanency and spotlight foster children in protective custody who are waiting for adoptive families through portraits which reveal the children's spirits and individuality.
- Supported by the DFPS and the Texas Workforce Commission partnership with other local organizations, 18 transition centers support youth who are transitioning or recently transitioned from foster care by serving as a central clearinghouse for the Preparation for Adult Living program, workforce services such as job readiness, job search help, exploring careers, assistance enrolling in college, housing assistance, and some mentoring opportunities. Some serve as a key link with community agencies for substance abuse treatment, mental health counseling, and leadership training.
- Children are diverted from DFPS conservatorship through HHSC residential treatment center beds and access to the Youth Empowerment Services Waiver Wraparound program administered by local mental and behavioral health authorities. The Texas Legislature appropriated funds for 40 beds during fiscal year 2019. HHSC manages the contracts with private residential treatment centers in as many areas of Texas as possible and referrals come from CPS. Since initiating the program, CPS has referred approximately 560 youth to HHSC for residential treatment center placement as an alternative to DFPS conservatorship. DFPS screens and facilitates the referrals. HHSC works directly with the local mental and behavioral health authorities which in turn complete a CANS assessment on each child. Children placed in the Diversion Bed program receive services in a safe, therapeutic environment with 24-hour supervision, while their caregivers maintain conservatorship. Services provided include individual, group, and family therapy; recreation therapy; psychiatric consultations; and medication.
- The 15 Texas Citizen Review teams are citizen-based panels that evaluate DFPS casework and decision-making related to investigating and providing services to abused and neglected children. Membership includes community representatives and private citizens residing in the area for which the team is established.
- Children's Advocacy Centers are community-based programs that coordinate the activities of agencies responsible for the investigation and prosecution of child abuse cases, as well as delivery of services to child abuse victims and their families. Built on a partnership that includes representatives from CPS, law enforcement, prosecution, and medical services providers, advocacy centers use a cooperative, multidisciplinary team approach to handling child abuse cases in a child-friendly environment.

#### Concerns:

- Although collaboration and community engagement provide extensive support to the Texas child welfare system, there are still barriers associated with significant population growth, poverty, and diverse needs.
- For each service reflected as a strength and contribution above, there remains a gap

when matching the services and resources to the extensive need.

- DFPS has not yet fully experienced or analyzed the impact of the widespread COVID-19 pandemic. This crisis appears to have reduced access to services and had a significant financial, social, and medical impact on children, families, and service providers.

DFPS has increased the communication regarding agency plans, needs, news, initiatives, and changes through a variety of venues. These include a robust and interactive agency public website on which the Title IV-B Five Year Plan and Annual Provision of Services Reports are posted. Key reports and weblinks are as follows:

- DFPS strategic plan for 2023-2027 which includes information for CPS - [https://www.dfps.state.tx.us/About\\_DFPS/Strategic\\_Plans/default.asp](https://www.dfps.state.tx.us/About_DFPS/Strategic_Plans/default.asp).
- CFSP Final Report and Plan for FY's 2015-2019 - [https://www.dfps.texas.gov/About\\_DFPS/Title\\_IV-B\\_State\\_Plan/](https://www.dfps.texas.gov/About_DFPS/Title_IV-B_State_Plan/)
- DFPS Annual Report - [http://www.dfps.state.tx.us/About\\_DFPS/Annual\\_Report/default.asp](http://www.dfps.state.tx.us/About_DFPS/Annual_Report/default.asp)
- Information for DFPS Stakeholders - [http://www.dfps.state.tx.us/About\\_DFPS/Public\\_Meetings/default.asp](http://www.dfps.state.tx.us/About_DFPS/Public_Meetings/default.asp)
- DFPS Council Meetings - [https://www.dfps.state.tx.us/About\\_DFPS/Public\\_Meetings/Council/](https://www.dfps.state.tx.us/About_DFPS/Public_Meetings/Council/)

Please see further information about Agency Response to the Community contained within this CFSP that addresses DFPS' efforts to coordinate services and partner with community members and organizations to better support children and families being served by DFPS.

## **7. Foster/Adoption Licensing, Recruitment and Retention Systemic Factor**

The state is granted authority to regulate childcare facilities and child-placing agencies by the Texas Legislature in the Texas Human Resources Code, Chapter 42. When children cannot live safely at home and there is no appropriate non-custodial parent, relative, or close family friend willing and/or able to care for them, the court can give temporary legal possession to DFPS to temporarily place these children in foster care. Foster care settings include:

- Foster family homes;
- General residential operations; and
- Facilities overseen by another state agency.

Foster care is meant to be temporary until a permanent living arrangement is found. Temporary managing conservatorship is a court-ordered legal relationship between a child and a parent or nonparent. If a judge appoints DFPS as temporary managing conservator, the court will order DFPS to exercise specific rights and duties which include, but are not limited to, the right to have physical possession of the child, the duty of care, control, and protection of the child, the right to designate the primary residence of the child, and the right to make decisions concerning the child's healthcare and education.

Generally, temporary managing conservatorship continues for up to 12 months with the ability to extend an additional six months due to specific circumstances at which time the judge issues a final order returning the child home, appointing a person or DFPS as a permanent managing conservator which is the status a court awards to DFPS or a person in a final order. DFPS can be awarded permanent managing conservatorship with or without termination of the rights of the child's parents. The rights and duties of a permanent managing conservator are typically the same as those of the temporary managing conservator; however, as the permanent managing conservator, DFPS continues to exercise those rights until the child is adopted, permanent managing conservatorship is transferred to a suitable person, or the child becomes a legal adult at age 18 and/or terminating parental rights, thereby making the child eligible for adoption.

DFPS strives to ensure quality services and stability of placement for children in foster care. There are circumstances when children in foster care may change placements due to a variety of factors, such as opportunities to move from a nonrelative to a relative caregiver, court rulings, or changes in the foster home or facility.

DFPS verifies foster and adoptive families through its own certified child-placing agency to help ensure there are enough foster and adoptive homes for children in DFPS custody. Most DFPS administrative regions holds a certificate issued by HHSC Residential Child Care Licensing to operate as a child-placing agency. As a child-placing agency, CPS adheres to the same minimum standards and is monitored in the same way as any other child-placing agency. DFPS develops an annual recruitment plan to address the need for homes based on the child population each region serves for children requiring basic childcare services or any regional priority for adoptions. DFPS staff and foster parents work as a team to develop and identify the best permanent home possible for children in substitute care. Foster parents may also become approved as an adoptive home. Additionally, private licensed child-placing agencies verify their foster, adoptive, and foster/adopt homes and general residential operations and residential treatment centers provide out of home care to children who may have specific needs.

DFPS Foster and Adoptive Home Development staff verify CPS foster homes while private child-placing agencies verify their foster homes. Child-placing agency means a person, including an organization, other than the natural parents or guardian of a child who plans for the placement of or places a child in a child-care facility, agency foster home, or adoptive home. Private child-placing agencies provide all treatment services and foster home care for children in DFPS conservatorship. Residential child-care facility means a facility licensed or certified by DFPS that operates for all of the 24-hour day. The term includes general residential operations, child-placing agencies, foster homes, and agency foster homes.

DFPS contracts with more than 340 licensed-residential childcare providers to provide substitute care to children in DFPS conservatorship. Through these contracts, DFPS establishes the qualifications, standards, services, expectations, and outcomes for 24-hour child-care facilities and child-placing agencies. DFPS has residential contract

managers who assess, monitor, and manage these contracts. Residential contract managers serve as liaisons between DFPS staff and residential providers to improve communication, gather input, and resolve conflicts. They also work closely with a DFPS third party reviewer (Youth for Tomorrow), CPS and the HHSC Child Care Regulation division (formerly Child-Care Licensing) to ensure contractors comply with service level requirements, contracts expectations, and licensing standards.

In multiple areas of the state, DFPS contracts with a SSCC to develop a network of substitute care providers through a model known as Community-Based Care. Each SSCC subcontracts with licensed residential childcare providers for substitute care services. The goal is to contract for a continuum of services that better identifies and responds to the needs of local children. The SSCC, rather than DFPS, is responsible for contract management, service level reviews, and coordination with HHSC Child Care Regulation division. The model introduces greater flexibility, with the SSCCs not bound to the same level of care system and payment rates, but able to establish these locally to best incentivize development of needed residential capacity and positive outcomes.

DFPS continues to recognize diligent recruitment of foster and adoptive homes must generate foster and adoptive families who meet the demographic characteristics of children in care. Demographic data of the characteristics of the children needing foster and adoptive homes is available to all staff through the Data Warehouse reports updated monthly. Current demographic information on children and families is being used to establish recruitment targets and track progress. A statewide [foster care needs assessment](#) is published annually. Using the completed needs assessments and other available data, DFPS develops [regional capacity strategic plans](#) to address the substitute care capacity needs in each region. DFPS involves external stakeholders in discussions regarding placements, and their input is included in the development of strategic planning regarding recruitment efforts. DFPS is committed to reaching out to all parts of a community and will work in collaboration with faith- and community-based organizations to accomplish this goal. In areas contracted under Community-Based Care, the SSCC takes responsibility for assessing local needs, working with the local community, and identifying the strategies to recruit foster and adoptive homes.

DFPS contracts with the Texas Foster Family Care Association and the Texas Council on Adoptable Children to provide support, training, and resources to foster and adoptive families throughout Texas. The purpose of these organizations is to educate, motivate, and support foster, adoptive, and kinship parents, as well as to be a united voice in advocating for the needs of those children and families. These organizations focus on the retention of foster and adoptive families for children in DFPS conservatorship.

### **Community-Based Care (Formerly Foster Care Redesign)**

Since 2010, DFPS has been engaged in redesigning the foster care system to expand the role of community providers to take responsibility for placement services, capacity/network development, community engagement, and the coordination and delivery of services to children in foster care and their families under a SSCC.

In 2017, the Texas Legislature directed DFPS to expand the redesign effort to include the

purchase of case management and substitute care services from the SSCCs through a model known as Community-Based Care.

Substitute care includes both foster care and relative/kinship placements. Purchasing substitute care and case management services from the provider community allows CPS to focus on child safety by investigating reports of abuse and neglect, providing in-home FBSS, and ensuring quality oversight of the foster care system. Ensuring individual children achieve timely permanency becomes the responsibility of the SSCCs.

In 2021, the 87th Texas Legislature, as part of Texas Family Code, Subchapter B-1, Chapter 264, Section 264.172, formally established the Office of Community-Based Care Transition (OCBCT), a state agency independent of, but administratively attached to DFPS. The OCBCT and DFPS, along with HHSC, work together to implement Community-Based Care. Currently, DFPS has eight SSCC contracts with four awarded in 2023.

- DFPS contracted with ACH Child and Family Services/Our Community. Our Kids (OCOK) to provide services in Region 03b, Tarrant and six surrounding counties beginning fiscal year 2015. DFPS renewed its existing contract with ACH in 03b on September 1, 2018, to include all Community-Based Care services. OCOK began providing case management and all other Stage II services on March 1, 2020.
- In June 2018, DFPS awarded a contract to 2INgage, a new partnership between Texas Family Initiative, LLC, and New Horizons Ranch and Center, Inc., to serve as the SSCC for Region 02, the Abilene/Wichita Falls area. 2INgage implemented Stage I Community-Based Care (placement services) on December 1, 2018, after a 6-month start-up stage. 2INgage began providing Stage II services on June 1, 2020.
- In July 2019, DFPS awarded a contract to St. Francis Community Services, Inc., to serve as the SSCC for Region 01, the Amarillo/Lubbock are. St. Francis began serving children in Region 01 on January 6, 2020, after a 6-month start-up period. St. Francis began providing Stage II services on March 2, 2022.
- In March 2021, DFPS awarded a contract to Belong, a division of SJRC Texas, to serve as the SSCC for Region 08b, all counties in DFPS Region 8 excluding Bexar County. Implementation of Stage I Community-Based Care began in October 2021 following a successful 6-month start up period and confirmation of readiness. Stage II six-month start-up began in April 2022, and began Stage II on October 1, 2022, after readiness certification.
- DFPS/OCBCT received funding for four new catchment areas in the fiscal years 2022-23 biennium. The requests for applications were released in the following catchment areas in April 2022: Metroplex East (formerly DFPS Region 03E); Permian/Concho (formerly DFPS Region 09); Piney Woods (formerly DFPS Region 04); and Deep East Texas (formerly DFPS Region 05).
- On February 22, 2023, DFPS awarded a contract to EMPOWER, collaborative of Sprayberry, Adrienne Family Initiative, The Bair Foundation, Jonathan's Place, Pathways Youth and Family Services, and CK Family Services, to serve as the SSCC for the Metroplex East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.
- On February 22, 2023, DFPS awarded a contract to 4Kids4Families, a division of

Arrow Child and Family Ministries, to serve as the SSCC for the Piney Woods community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

- On March 15, 2023, DFPS awarded a contract to Texas Family Care Network, a division of Pressley Ridge, to serve as the SSCC for the Deep East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.
- On March 23, 2023, OCBCT/DFPS posed a request for applications for the entire Metroplex West community to include all 10 counties in the area. This application closed on April 20, 2023, with anticipated contract start date to be September 1, 2023.
- Contingent upon legislative appropriations, DFPS/OCBCT will post a request for applications for a SSCC in the following community areas: Bexar County, Harris County, Bay Area/Montgomery, and El Paso.

Stage II roll-out (case management and services to families) in all regions is subject to legislative appropriation and based on readiness. DFPS/OCBCT has requested funding from the 88th Texas Legislature to expand Community-Based Care into four new catchment areas, as well as funding to move forward with Stage II in the three new catchment areas (Regions 03E, 04, and 05) and Stage I in the regions placed under a request for application, contingent upon funding (Regions 06A, 06B, 08A, and 10). DFPS contracts with Chapin Hall of the University of Chicago for an outcome performance evaluation and Texas Tech University for an independent process evaluation for the entire rollout and implementation of Community-Based Care in each established catchment area. The Community-Based Care process evaluation was completed in November 2020 and can be found on the [Community-Based Care website](#).

### **Performance Measures**

As required by the 2020-21 General Appropriations Act, 86th Legislature, Regular Session, 2019, (Article II, DFPS Rider 15), DFPS/OCBCT is required to report on March 31 and September 30 each year selected performance measures that allow for comparative analysis between the legacy foster care and redesigned foster care systems. The report includes an analysis of the data that identifies trends and impact occurring in the redesigned foster care system, identification and analysis of factors negatively impacting any outcomes, recommendations to address problems identified from the data, and any other information necessary to determine the status of the redesigned foster care system. DFPS completed and submitted the September 2022 and March 2023 Rider 15 reports, as required. The next report will be released with fiscal year 2022, Quarter 3 data in September 2023.

### **Foster Care Capacity Stage I Objective**

The performance indicator most reflecting the foster care capacity challenge is the percentage of children placed close to home, defined in the metric as within 50 miles of removal. The percentage of children placed close to home continued to decline since fiscal year 2021 for the state as a whole as well as for non-Community-Based Care areas. It has increased for SSCC providers in the Panhandle, Metroplex West, and Big Country and Texoma designated community areas in fiscal year 2023, Quarter 1 compared to

fiscal year 2021. Placement proximity has decreased for South Central and Hill Country in comparison to its baseline years, fiscal years 2020 and 2021.

The ability to place siblings in foster care together is another area impacted by system-wide foster care capacity challenges. SSCC providers in the Panhandle, Big Country and Texoma, and Metroplex West show performance improvements in keeping siblings together, increasing from fiscal year 2021 by 0.4 percent, 8.0 percent, and 0.3 percent respectively. South Central and Hill Country have seen a decrease of 7.1 percent in comparison to its baseline years. Non-Community-Based Care areas have declined with a 1.9 percent decrease in performance in fiscal year 2023, Quarter 1 compared to fiscal year 2021.

Statewide, children are spending fewer placement days in a least restrictive setting compared to fiscal year 2021, and all designated community areas also saw a decrease in children placed in least restrictive settings.

All safety performance below 100 percent is an area to target for improvement. Statewide and Statewide Non-Community-Based Care child safety improved in fiscal year 2023, Quarter 1 compared to fiscal year 2021, Quarter 1 with all designated community areas improving compared to fiscal year 2021, Quarter 1 except Panhandle and Big Country and Texoma. South Central and Hill Country had the highest safety rate in fiscal year 2023, Quarter at 100 percent.

### **Permanency Stage II Objective**

While placement with relatives or kin are the Stage II contract performance measures, the goal of Stage II is to improve exits to permanency, including both the number of children exiting to permanency and the speed at which they exit. Placement with kin generally improves child outcomes, including permanency, either with exits to kin or by facilitating connections to parents and placement stability, which are positively related to permanency.

Texas has historically performed well in placing children in state conservatorship with relatives or kin and finding relatives or kin to permanently care for children when reunification with parents is not possible. The performance measure is important to ensure SSCCs sustain or improve upon these trends. Non-Community-Based Care areas of the state declined by 3 percent between fiscal years 2021 and 2022. Metroplex West and Big Country and Texoma saw an increase between fiscal years 2021 and 2022, 8.0 percent and 0.4 percent respectively, and Panhandle had a decrease in children being placed with kin at 60 days after removal. South Central and Hill Country started Stage II in fiscal year 2023; therefore, there is no data to report on SSCC performance for that area as this measure is delayed.

With four designated community areas in Stage II, Section A performance metrics related to permanency become relevant. This report will not, however, give detailed attention to the Section A exit measures because the focus of this report is the Community-Based Care contracted performance measures. Risk adjusting for case mix has the advantage

of determining if the change seen in the exit population was due to a process slow down/speed or is attributable to change in the child population characteristics. That said, it is worth noting that there has been a statewide drop in the percent of the population exiting to permanency within 12 months since fiscal year 2018, as well in declines in all of the SSCC designated community areas from fiscal year 2022 to fiscal year 2023, Quarter 1.

### **Our Community, Our Kids – Metroplex West (Tarrant, Erath, Hood, Johnson, Palo Pinto, Parker, and Somervell counties)**

OCOK has contracted with DFPS for services to children in foster care since fiscal year 2015. Beginning in fiscal year 2020, Quarter 3, OCOK transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in designated community area Metroplex West, made up of the seven counties around Fort Worth. The average performance for fiscal years 2018 and 2019 is used as the baseline average for comparison.

- **Safety in Foster Care** – 99.8 percent of children were safe in foster care placements as of fiscal year 2023, Quarter 1. Safety below 100 percent represents an area for improvement.
- **Placement Stability in Foster Care** – 1.18 foster care placements per child in fiscal year 2023, Quarter 1 shows an increase from the fiscal year 2022, Quarter 1 measure of 1.17.7 This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 82.9 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline, but increased since fiscal year 2022.
- **Foster Care Placement within 50 miles** – 72.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter. This is an increase from fiscal year 2022 and slightly below the baseline years.
- **Sibling Groups Placed Together in Foster Care** – 63.3 percent of sibling groups were placed together on the last day of the quarter. This is below baseline but has increased since fiscal year 2022.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 94.1 percent of youth turning 18 (includes youth in foster care, kinship care, and other settings in Stage II) completing Preparation for Adult Living shows a slight decrease from the previous year, but well above baseline.

### **2INgage – Big Country and Texoma**

2INgage has contracted with DFPS for services to children in foster care since fiscal year 2019. Beginning in fiscal year 2020, Quarter 4, 2INgage transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Big Country and Texoma designated community area. This area is comprised of 30 counties covering a large rural area with historical capacity challenges. The average performance for fiscal years 2021 and 2022 is used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in 2INgage foster care

placements. Safety below 100 percent represents an area for improvement.

- **Placement Stability in Foster Care** – 1.13 placements per child in fiscal year 2023, Quarter 1 is an improvement from fiscal year 2022, Quarter 1 performance of 1.14. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 86.7 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has declined since fiscal year 2021 and is lower than baseline.
- **Foster Care Placement within 50 miles** – 41.1 percent of children placed within 50 miles of their removal address on the last day of the quarter is an improvement from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 68.4 percent of sibling groups placed together. This is an increase from baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 77.8 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living in fiscal year 2023, Quarter 1, showing a large decrease from fiscal year 2022. Performance is below baseline.

### **Saint Francis Community Services Inc. – Panhandle**

St. Francis has contracted with DFPS for services to children in foster care since fiscal year 2020. Beginning in fiscal year 2022, Quarter 3, St. Francis transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Panhandle designated community area. This designated community area is comprised of 41 counties in an area of the state that faced significant capacity challenges prior to Community-Based Care implementation. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in Saint Francis foster care placements. Performance below 100 percent is an area for improvement.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is lower than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.49 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has seen continued decline since fiscal year 2020 and is below baseline years.
- **Foster Care Placement within 50 miles** – 42.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter, an increase from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 63.8 percent of sibling groups placed together on the last day of the quarter is above baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.

- **Preparation for Adult Living** – 61.5 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living which is a large decrease from baseline years.

### **Belong- South Central and Hill Country**

Belong began serving children on October 27, 2021, and entered Stage II in fiscal year 2023, Quarter 1. Beginning in fiscal year 2023, Quarter 1, Belong transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the South Central and Hill Country designated community area. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 100 percent of children were safe in Belong foster care placements. 100 percent is always the target for safety.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is higher than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.1 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline years.
- **Foster Care Placement within 50 miles** – 37.7 percent of children were placed within 50 miles of their removal address on the last day of the quarter, a decrease from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 55.4 percent of sibling groups placed together on the last day of the quarter, a decrease from baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 76.9 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living which is a large decrease from baseline year.

DFPS established a Public/Private Partnership advisory committee, by administrative rule, comprised of DFPS leadership, former foster youth, parent partners, private residential providers, advocates, trade associations, and judges. The partnership works to develop and implement contract performance measures related to residential service provider responsibilities that affect the safety, permanency, and well-being of children in care. The performance measures align with the federal CFSR measures and the DFPS statewide strategic plan for placement. This is a standing committee which continues to meet to revise and develop meaningful measures on an ongoing basis. Workgroup members were a resource to the Community-Based Care project team to identify quality indicators for the Community-Based Care model.

The Committee for Advancing Residential Practices is also an advisory committee established by administrative rule, dedicated to improving practices in residential and foster care. Residential childcare contractors, associations, and DFPS representatives

meet quarterly to strengthen our partnership, improve communication, and work to improve the safety, permanency, and well-being for children.

On an ongoing basis, demographics of children and needs for enhanced capacity is shared with external stakeholders to continuously develop capacity. Information is shared through a variety of ways:

- Posted child demographic data on the DFPS website entities interested in serving foster children can review to make determination on capacity needs;
- Regular residential childcare licensing information meetings to the public that includes child demographic information; and
- Regular residential provider meetings across the state where DFPS and the SSCC (where applicable) staff share specific regional and local capacity needs for foster children.

Based on the above data and input from stakeholders, brief assessments of strengths showing the effectiveness of the Foster/Adoption Licensing, Recruitment and Retention system are listed below.

#### Strengths:

- DFPS utilizes the assistance of local community groups, faith-based organizations, media, brochures, and other recruitment materials to recruit potential foster families for children in DFPS conservatorship.
- DFPS participates with other adoption organizations during national recruitment campaigns and promotes children registered on the Texas Adoption Resource Exchange and other websites, including the AdoptUSKids national website.
- DFPS provides Enhanced Adoption Assistance to increase the monthly adoption assistance for families who are adopting a child who would otherwise remain in foster care through age 18 due to their unique needs.
- DFPS approved normalcy standards and emphasizes normalcy for youth in foster care in partnership with residential providers and community stakeholders.
- Permanency Care Assistance helps to maintain kinship care after transfer of permanent managing conservatorship.
- DFPS opted to use the federal Supervised Independent Living program to better support young adults and offers placement options for youth participating in extended foster care age 18 to 21 years old.
- DFPS addresses provider needs through venues such as the Committee for Advancing Residential Practices, regional provider meetings across the state, trade organizations, local associations and coalitions, and faith-based communities.
- In Community-Based Care, the SSCC developed centralized recruitment campaigns.
- The Children's Commission and DFPS work with judges and legal stakeholders regarding the Indian Child Welfare Act, and DFPS is in conversations with the Ysletta del Sur Pueblo/Tigua Tribe regarding the tribal interest in a Title IV-E Agreement.

#### Concerns:

- The COVID-19 pandemic impacted the recruitment and licensure of foster care

providers with effects still being experienced.

- There is an imbalance in geographic distribution of services and providers.
- There are not enough residential providers with a full continuum of services to meet the need.
- It is a challenge to provide thorough, efficient, and timely background check results to more than 250,000 people each year seeking to work in childcare, provide foster care, or adopt a child.
- It is difficult to create standards to protect the health and safety of children in care without affecting the affordability and availability of that care.
- Licensing requirements may create a sudden financial burden for some kinship caretakers in complying with minimum standards to become foster/adoption homes.
- Finding homes for older youth or youth with significant behavioral health or physical health needs is difficult, and there is a need for strong treatment homes.
- There are not enough African American, Latino, or Spanish-speaking foster families. DFPS has not been able to target these communities for recruitment as most recruitment campaigns involve donated media airtime. DFPS does not have a line-item budget for this purpose.
- Recruitment needs to be strengthened in military communities for families who can foster while locally stationed.

During the time a child is in the conservatorship of DFPS, CPS staff work to support the substitute care setting best suited to a particular child's needs. Substitute care placements can include kinship care, foster care, and placement in residential care facilities, adoption, or transition to independent living. Please see further information about Foster/Adoption Licensing, Recruitment and Retention contained within this annual report.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section IV. 2024 Annual Progress and Services Report (APSR)**

**A. Review Goals, Objectives, and Strategies**

**B. Program Support**

**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**



## 2024 Annual Progress and Services Report (APSR)

### IV. A. Goals, Objectives, and Strategies

#### Goal 1: Maximize the Safety, Permanency, and Well-Being of Children and Youth

**Rationale:** The Texas child welfare system, including Texas Department of Family and Protective Services (DFPS) divisions such as Prevention and Early Intervention (PEI), Child Protective Investigations (CPI), and Child Protective Services (CPS), have a comprehensive service array that extends statewide to all regions and counties. Texas maintains methods that assess the strengths and needs of children and families to determine the services necessary for creating a safe home environment, enabling children to remain safely with their parents when possible, and helping children in out-of-home placements achieve permanency. The DFPS family-focused culture encourages families involved with the agency to build on their strengths to care for children within their own homes and communities whenever possible. DFPS collaborates with families and stakeholders to develop individualized family plans with supportive resources necessary for the safety and well-being of children, youth, and families and the achievement of positive permanency.

Children in DFPS conservatorship receive medical care primarily through Medicaid via a statewide, comprehensive managed care program known as STAR Health which is currently administered by a contract between the Texas Health and Human Services Commission (HHSC) and Superior Health Plan. STAR Health provides medical, behavioral health, dental, vision, and pharmacy services. An electronic, claims-based Health Passport is maintained for each child in DFPS conservatorship. The Health Passport also contains information on medical and dental visits, diagnoses, hospital stays, prescriptions, assessments, immunization records, and other information. If a child or youth was a Medicaid recipient prior to removal, recent Medicaid claims data is incorporated into the Health Passport to ensure continuity of care.

DFPS has developed specialized positions to help meet the well-being needs of children, such as well-being specialists, developmental disability, mental health, child, Adolescent Needs and Strengths (CANS) assessment program, trauma-informed care, nurse substance use, and education specialists, as well as nurse consultants. To elevate the voice of the parent and child, DFPS also has parent program, fatherhood program, and youth specialists, along with family group decision-making staff. In addition, the DFPS Human Trafficking and Child Exploitation (HTCE) division was established to strengthen the anti-trafficking work for the children and youth served by DFPS.

DFPS has a strong collaborative relationship with the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (Children's Commission). The Children's Commission and its Collaborative Council, in partnership with

the Texas Education Agency (TEA) and many stakeholders, launched an *Education Blueprint* with an action plan to focus on improving educational outcomes for children in care. The Children's Commission also sponsors the Statewide Collaborative on Trauma-Informed Care with an action plan to further instill trauma-informed care in all aspects of the Texas child welfare system.

Texas successfully completed its Round 3 Child and Family Services Review (CFSR) Program Improvement Plan (PIP). Although the plan is completed, cross-cutting issues from the Round 3 federal CFSR PIP process are identified for reference below.

### **Goal 1 Relates to CFSR PIP Cross-Cutting Issues 1, 2, 3, 4, 5, and 6.**

#### **Objective 1.1: Prevent delinquency and child abuse/neglect – Claire Hall**

**Rationale:** Research has identified risk factors that contribute to an increased likelihood of child maltreatment and/or juvenile delinquency, and conversely, protective factors that protect children from maltreatment and reduce youth's engagement in delinquency by strengthening the child, their family, and communities. PEI invests in primary and secondary prevention programs and services to reduce risk factors and promote protective factors and resiliency in children, youth, families, and communities. These programs strive to prevent entry into the Texas child welfare and juvenile justice systems.

#### **Expected Outcomes**

- Parents and caregivers who complete a minimum number of required services will not abuse nor neglect their children;
- Children served will not suffer from abuse or neglect;
- Youth who complete a minimum number of required services will not engage in juvenile delinquency;
- Parents and caregivers who complete a minimum number of required services will experience an increase in at least one protective factor as demonstrated by the results of the protective factors survey completed before and after receiving services; and
- Youth who complete a minimum number of required services will experience an increase in at least one protective factor on the protective factors survey completed before and after receiving services.

#### **Outcome Measures**

- Clients experience an increase in protective factors as demonstrated by protective factors survey results;
- Children remain safe; and

- Youth do not engage in delinquent behavior.

Interim Benchmark/Milestone	Target Completion
1. Procure new PEI programs according to DFPS and HHSC procurement plans.	Ongoing
2. Create and disseminate child abuse prevention awareness calendar.	Annual
3. Promote infant safe sleep awareness, water safety, and hot car campaigns.	Ongoing
4. Enhance and promote statewide child abuse prevention campaign.	Ongoing
5. Build awareness of Child Abuse Prevention Month to the public and stakeholders.	April (annual)
6. Participate in workgroups and plan with other agencies, providing prevention or early intervention services, and collaborate with stakeholders, including other state agencies to improve the effectiveness of prevention efforts.	Ongoing
7. Conduct an annual training conference that brings together child abuse and neglect, juvenile delinquency prevention, early intervention professionals, and service providers.	Ongoing
8. Utilize the primary caregiver satisfaction survey to inform planning and decision making.	Ongoing
9. Monitor contractors' administration of program experience survey.	Ongoing
10. Share key information on prevention services and topics with DFPS investigation caseworkers.	Ongoing
11. Coordinate efforts and share PEI program and public awareness information with other DFPS program resources to ensure effective local relationships.	Ongoing
12. Coordinate with HTCE on public awareness and prevention efforts and improve PEI and PEI providers' capacity to identify, report, recover, and restore children and youth who are trafficked or at risk of trafficking.	Ongoing

### Summary

PEI continues to prevent juvenile delinquency and child abuse/neglect. PEI is coordinating two community grant opportunities in fiscal year 2023. PEI has an active request for applications for the Family and Youth Success program and will release a request for applications for the Community Youth Development program in Summer 2023. PEI is also planning for future grant opportunities scheduled for fiscal year 2024, including the Fatherhood EFFECT (Educating Fathers for Empowering Children Tomorrow) program and the potential for expansion of other PEI programs, if directed and funded, as a result of the 88th Texas Legislature. All PEI grant opportunities and procurements support the DFPS vision and mission

to improve the lives of those we serve through the promotion of safe and healthy families and the protection of children from abuse, neglect, and exploitation. PEI continues to focus on supporting programs with evidence-based or evidence-informed models, as well as program design that incorporates a collaborative systems approach at the community level. To this end, PEI invests annually in consultation and technical assistance regarding evidence-based models and best practices to best support the communities achieving this work. PEI also conducts client satisfaction surveys and routine monitoring of providers. The feedback from these activities helps inform PEI if a provider is operating within the contractual constructs and the fidelity of the models.

PEI's public-facing, parenting tip website <https://www.getparentingtips.com> is a part of the PEI universal prevention strategy. In partnership with DFPS Communications, PEI created the website utilizing feedback from parents on how PEI's website could better meet their needs. Based on this feedback, the website's content shifted to include a variety of informative articles and video content created and published by subject matter experts. PEI also partnered with parent liaisons to create content for parents – by parents. The PEI Communications team continues to curate innovative content on diverse topics, organized by different age groups. The team continues buying ads to promote the redesigned website which has shown an increase in engagement and website traffic since the December 2020 launch. Since inception, GetParentingTips.com has recorded 3,354,307 sessions, 1,816,688 users, and 4,170,710 pageviews.

The 2018 Family First Prevention Services Act (FFPSA) is a federal law intended to prevent children from entering foster care, reduce the use of residential congregate care in favor of family-like settings, and strengthen support for kinship care placements. FFPSA recognizes children do best when maintained safely in their own families. The law provides additional federal funding to states that “opt-in” to increase the number of resilient families and prevent children from entering the foster care system. Under FFPSA, Texas could obtain federal Title IV-E funding to enhance prevention services to pay for mental health, substance use, and in-home parent training services for families at imminent risk of their child entering foster care. The target population is children or youth who are candidates for foster care, pregnant or parenting youth in DFPS conservatorship, and the parents or kinship caregivers of those children and youth. The goal is to forward PEI objectives to help communities identify prevention and early intervention needs, continue or develop new evidence-based prevention programming, incorporate commitments to cultural diversity and under-represented or underserved groups, and establish an array of prevention services to prevent entry to higher end systems including child welfare. In collaboration with the broader DFPS Prevention and Community Well-Being division, PEI continued implementing legislative directives for prevention services under the Family First Act. During fiscal years 2022 and 2023, PEI initiated contract updates to incorporate Family First Transition Act (FFTA) funds into eight existing Texas Nurse Family Partnership contracts to serve pregnant and parenting youth in foster care; oversaw initial implementation of kinship navigator programs designed to support the many informal kinship placements that occur outside the child welfare system; and expanded capacity for the

Healthy Outcomes through Prevention and Early Supports (HOPES) program to serve FFPSA-eligible populations. Examples of prevention activities funded currently through other federal funding streams include fatherhood programs that benefit the family as a whole, programs for military and veteran caregivers, and family resource centers. The Texas 88th Legislative Session began January 2023, through which lawmakers are expected to provide updated direction on utilization of FFTA funding, as well as direction on Family First Prevention Services.

PEI also continues to support the Texas Prevention Framework Workgroup which focuses on: transforming the child welfare system into a child and family well-being system through elevating cross-sector prevention efforts; increasing inclusivity in the prevention of child abuse and neglect; and developing Texas's model of a public health approach to child welfare framework. PEI leadership meet regularly with the workgroup as thought leaders (e.g., using the prevention framework to further develop partnerships and commit to a common vision to support Texas families and messaging around our work supporting children and families in Texas).

The Bexar County Early Intervention Court Program funded by PEI is an example of cross-system coordination at the local level. The court provides a comprehensive, integrated, and coordinated systems approach to help families within Bexar County. This includes developing, supporting, and facilitating individualized services (e.g., home-based assessments, home visiting programs that provide evidence-based parent education, home visiting, and counseling) to meet the needs of some of Bexar county's most vulnerable families. The population includes infants, toddlers, and parents with risk of involvement with CPS, as well as those identified by CPS as candidates for intensive family preservation efforts to prevent future involvement in the child welfare system.

The PEI Policy and Prevention Strategies team is currently analyzing bills for the 88th Texas Legislative Session containing both direct and indirect implications for prevention programing and operations. PEI will work to implement new statutes that directly impact prevention in Texas including impact to PEI programs and practices.

Outcome Measure	Metric*	PEI Program	FY 2022 Outcomes	FY 2021 Outcomes
1. Clients experience an increase in protective factors as demonstrated by protective factors survey results.	Percentage of clients who demonstrated an improvement on pre- and post- tests**	All	98%	97%
2. Children remain safe.	Percentage of clients served in programs who remain safe according to a CPS data match***	HOPES	97.24%	97.28%
		Family and Youth Success	96.92%	97.49%
		Healthy Outcomes Through Intervention and Prevention	92.51%	96.00%
		Military	98.10%	99.05%
		Fatherhood EFFECT (Community-Based Child Abuse Prevention program)	97.46%	98.15%
3. Youth do not engage in delinquent behavior.	Percentage of youth NOT referred to juvenile justice according to a Texas Juvenile Justice Department (TJJD) data match***	Statewide Youth Services Network	99.08%	99.10%
		Community Youth Development	98.06%	98.71%
		Family and Youth Success	96.89%	95.75%

\*Data only available annually

\*\* According to the [PEI Outcomes \(Rider 20\) Report](#)

\*\*\* According to the [DFPS Data Book](#).

### **Strategy 1.1a Lead: Claire Hall**

**Strategy 1.1a: To support programs that help families and communities to prevent delinquency and child abuse and neglect, while also improving the capacity to identify, report, recover, and restore children and youth who are trafficked or at risk of trafficking through:**

- Funding community efforts and programs;
- Collaborative work with other state agencies;
- Hosting the Partners in Prevention conference;
- Evaluating caregiver feedback;
- Coordination with child welfare;
- Convening stakeholders to analyze prevention pathways to support children and families;

- Assessing community readiness for implementing FFPSA prevention activities; and
- Coordination with HTCE.

**Rationale:** Research has identified risk factors that contribute to an increased likelihood of child maltreatment and/or juvenile delinquency, and conversely, protective factors that protect children from maltreatment and reduce youth’s engagement in delinquency by strengthening the child, their family, and communities. PEI invests in primary and secondary prevention programs and services to reduce risk factors and promote protective factors and resiliency in children, youth, families, and communities. These programs strive to prevent entry into the Texas child welfare and juvenile justice systems

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Release grant opportunities for PEI programs according to DFPS and Texas Health and Human Services Commission (HHSC) grant plans.	Ongoing	PEI created a five-year grant opportunity and procurement plan to support the activities of its nine grant programs. The estimated procurement value is \$669 million over the five-year period. PEI is coordinating two community grant opportunities in fiscal year 2023 with an active request for applications for Family and Youth Success in fiscal year 2023 and the Community Youth Development program in Summer 2023. Additionally, PEI is implementing grant opportunities for FFPSA prevention services to comply with Legislative direction. PEI is also planning for future grant opportunities scheduled for fiscal year 2024, including the Fatherhood EFFECT program and the potential for expansion of other PEI program, if directed and funded as a result of the current Texas legislative session.
b. Participate in workgroups and plan with other agencies providing prevention or early intervention services, and collaborate with stakeholders, including other state agencies to improve the effectiveness of prevention efforts.	Ongoing	<p>PEI continues participation in collaborative groups of stakeholders such as the Early Childhood Interagency Workgroup, Help Me Grow, the BUILD Initiative, the Texas Early Learning Council, and others. PEI continues to partner with other state agencies to leverage funding and programing to best support families and communities to prevent child abuse, neglect, and delinquency.</p> <p>The Texas Prevention Framework Workgroup created a Texas Public Health Prevention Framework and continues to dive deeper to explore how families access programs and what gaps we can identify in supporting families in the community. PEI is working with university partners to evaluate and make recommendations to improve prevention programs across state agencies. This includes leveraging child welfare, Medicaid, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), vital statistics and prevention data to assess program impact.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
c. Conduct an annual training conference that brings together child abuse and neglect and juvenile delinquency prevention, early intervention professionals, and service providers.	Annually (Fall)	PEI celebrated its 22nd annual Partners in Prevention conference during September 2022 in Corpus Christi. This year's interactive conference welcomed 1,109 PEI professionals, including 857 in-person and 252 virtual attendees for 30 sessions, 5 intensives, and 2 keynote sessions. The conference attracts parent educators, youth service providers, civic leaders, policy advocates, researchers, and other child and family well-being professionals to participate in three days of learning and networking. The conference theme, <i>Anchored in Purpose</i> , presented opportunities to explore staying anchored to vision, mission, and goals, and finding renewed purpose. Attendees demonstrated what drives their work through poster sessions and participation in fireside chats with PEI leadership, trainings, and networking opportunities. PEI has already begun planning for the next annual Partners in Prevention conference for Fall of fiscal year 2024. This conference will be held in Austin. Conference planning is a year-round endeavor.
d. Utilize the primary caregiver satisfaction survey to inform planning and decision making.	Annually and ongoing thereafter	Quarterly and annual survey results are reviewed by the research and evaluation team and PEI's program teams. These results are then discussed and shared with providers. Satisfaction has generally been very high, higher than internal targets set by PEI, but concerns are discussed where outliers are identified.
e. Monitor contractors' administration of program experience survey.	Annually and ongoing thereafter	PEI contractors are required to submit a quarterly progress report. PEI executes an annual monitoring plan based on a risk assessment of providers. Modification can be made to the plan if concerns arise. PEI developed the fiscal year 2023 statewide monitoring plan and is currently implementing it.
f. Share key information on prevention services and topics with DFPS investigation caseworkers.	Quarterly and ongoing thereafter	During fiscal year 2023, the PEI Office of Child Safety is collaborating with CPI and CPS to provide ongoing training to staff to support assessment, understanding history, and protective factors to support ongoing child safety.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
g. Coordinate efforts and share PEI program and public awareness information with other DFPS program resources to ensure effective local relationships.	Quarterly and ongoing thereafter	PEI continues to promote the public awareness campaign GetParentingTips.com. The site provides up-to-date tips, articles, information, and resources for handling the challenges of parenting, managing stress, and keeping children safe and healthy at all stages of development from prenatal to adolescent years. In February 2023, PEI released the videos <i>Three Families Get Real About Parenting</i> with conversations about how three families manage discipline, stress, and breaking old habits to find better ways to parent.
h. Convene a cross-agency, public-private Texas Prevention Framework workgroup to conduct an upstream data analysis and map out prevention pathways for children and families, including child welfare, PEI, and the court improvement project.	Ongoing convening	The workgroup met quarterly to advance its goals, as well as continued participating in Thriving Families Safer Children learning collaborative webinars.
i. Continue to partner with Texas communities to plan for implementing Family First Prevention Services Act by identifying prevention and early intervention needs, continuing or developing new evidence-based prevention programming, and establishing an array of prevention services to prevent entry to higher end systems including child welfare.	Fall 2020	During 2022 and 2023, PEI initiated contract updates to incorporate FFTA funds into eight existing nurse family partnership contracts to serve pregnant and parenting youth in foster care; oversaw initial implementation of kinship navigator programs designed to support the many informal kinship placements that occur outside the child welfare system; and expanded capacity for the HOPES program to serve FFPSA-eligible populations.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>j. Coordinate with HTCE on public awareness information and prevention efforts and improve PEI and PEI providers' capacity to identify, report, recover, and restore children and youth who are trafficked or at risk of trafficking.</p>	<p>Quarterly and ongoing thereafter</p>	<p>Bi-monthly meetings are held with the HTCE team and PEI to continue coordinating public awareness and prevention information. DFPS promotes human trafficking awareness via <i>PEI Provider News</i>, the PEI newsletter sent to providers weekly that includes provider updates, training opportunities, and resources. This information is also included in PEI's monthly newsletter to the prevention community, as needed. Cross-collaboration occurs at HTCE, and PEI annual conferences and training resources are provided to PEI grantees. In September 2022, PEI offered a four-hour intensive session titled <i>Domestic Familial Trafficking Stark Realities and Service Provision</i> at its annual Partners In Prevention conference. In January 2023, PEI providers were included in all DFPS promotions for National Human Trafficking Prevention Month which included the <i>DFPS 2023 Participation Guide</i>, as well as the DFPS Light the Way End Human Trafficking: 2023 Lunch and Learn Series. PEI grantees will be invited to participate in the DFPS Light the Way End Human Trafficking 2023 Summit in August 2023. In Spring and Summer 2023, HTCE is completing an assessment of PEI grantees to assist in the development of potential strategies for enhanced anti-trafficking partnerships.</p>

**Objective 1.2: Improve prevention and intervention strategies and services – Claire Hall**

**Rationale:** Through targeted service delivery in the PEI division and direct-delivery services available in the CPI and CPS divisions, child safety can be strengthened while simultaneously improving family and community protective factors. PEI's legislatively required growth strategy includes data associated with child abuse and neglect fatalities or near-fatalities and informs the expansion of services for prevention and intervention with families. DFPS will target communities with high maltreatment risk to assist in providing prevention services.

**Expected Outcomes**

- Communities will select programs specific to their identified needs to provide services prior to DFPS involvement; Communities will build capacity to serve families where child maltreatment has already been identified; and
- Targeted efforts aimed at preventing abuse and neglect will include both fatal and near-fatal abuse and neglect.

**Outcome Measures**

- Increased number of children who remain safe during services;
- Decreased number of child victims with subsequent reports of abuse and/or neglect;

- Decreased number of child deaths with previous DFPS history; and
- Continued collaboration with the state agencies to ensure improved coordination of information, policies, and programs for prevention and early intervention of child abuse and neglect.

Interim Benchmark/Milestone	Target Completion
Coordinate with Texas Department of State Health Services to review child fatality data and provide aggregate information to inform prevention and intervention services on a county and statewide scale.	Ongoing
Track and analyze child maltreatment related fatalities and near fatality cases.	Ongoing
Track cause and manner of death.	Ongoing
Monitor system for reviewing, recording, and analyzing child abuse and neglect related near fatalities and fatalities through continuous quality improvement process.	Ongoing
Produce annual report regarding investigated child fatalities and near fatalities. Annual report will be published on the DFPS Office of Child Safety website.	Ongoing (Annually)
Collaborate with stakeholders and other state agencies to design, promote, and/or support ongoing prevention efforts surrounding trends identified in child fatality and near-fatality review.	Ongoing
PEI will continue to improve and sustain productive relationships with communities.	Ongoing
PEI will continue to explore best practices in program implementation and expansion while maintaining model fidelity.	Ongoing
Utilize PEI's growth strategy in the development of purchasing requests for proposals.	Ongoing
Monitor and update PEI's business and strategic plans.	Ongoing

### Summary

In March 2023, the *Child Maltreatment Fatalities and Near Fatalities* report was published by DFPS Office of Child Safety. DFPS and the Texas Department of State Health Services work together to track and analyze child maltreatment related fatalities and near fatality cases, including manner of death. The Office of Child Safety is charged with on-going analysis of fatalities and near fatalities. Using the report and on-going analysis, the DFPS Office of Child Safety monitors the state system for reviewing, recording, and analyzing child abuse and neglect related near fatalities and fatalities, as well as ensuring a continuous quality improvement process. More information on this report is available at: [Fiscal Year 2022 Child Maltreatment Fatalities and Near Fatalities Annual Report \(state.tx.us\)](https://www.dfps.state.tx.us/Child_Safety/Child_Maltreatment_Fatalities_and_Near_Fatalities_Annual_Report_(state.tx.us).).

Over the past year, PEI solicited input from parent partners, community stakeholders, researchers, advocates, and staff to inform and shape the new five-year strategic plan which includes seven objectives designed to support the creation of safe, stable, and nurturing environments for Texas children, youth, families, and communities. These objectives are intentionally broad to allow for continued partnership and collaboration to meet the needs of Texas communities over the next five years. Additionally, PEI updated its fiscal year 2022 business plan. As these plans indicate, PEI is committed to working with communities to promote prevention at a systematic level and does so to the extent of a contractual requirement. PEI is committed to excellence and focuses on contracting with providers utilizing evidence-based programs. PEI also invests in technical assistance contracts with major evidence-based models to best support providers through implementation. For more information on the PEI Strategic Plan, visit: [Prevention and Early Intervention Five Year Strategic Plan, Fiscal Years 2022-2026 \(state.tx.us\)](https://www.state.tx.us/preventionandearlyintervention/five-year-strategic-plan). For more information on the PEI Business Plan, visit: [Prevention and Early Intervention Fiscal Year 2022 Business Plan \(state.tx.us\)](https://www.state.tx.us/preventionandearlyintervention/fiscal-year-2022-business-plan)

In PEI, outcome measures can only be provided annually due to coordination with other state agencies and departments. The following are the most recent data updates.

Outcome Measure	Metric*	PEI Program	FY 2022 Outcomes	FY 2021 Outcomes
1. Increased number of children who remain safe during services	Percentage of clients served in programs who remain safe according to a CPS data match**	HOPES	97.24%	97.28%
		Family and Youth Success	96.92%	97.49%
		Healthy Outcomes Through Intervention and Prevention	92.51%	96.00%
		Military	98.10%	99.05%
		Fatherhood EFFECT (Community-Based Child Abuse Prevention program)	97.46%	98.15%
2. Decreased number of child victims with subsequent reports of abuse and/or neglect***	Number of fatalities where abuse and/or neglect was confirmed	N/A	182	199

Outcome Measure	Metric*	PEI Program	FY 2022 Outcomes	FY 2021 Outcomes
3. Decreased number of child deaths with previous DFPS history***	Number of cases with CPS history for confirmed child abuse and neglect-related fatalities	N/A	72	96
4. Continued collaboration with the state agencies to ensure improved coordination of information, policies, and programs for prevention and early intervention of child abuse and neglect	PEI participation in state agency collaboratives	All	Partner state agencies include: the Texas Department of State Health Services, TEA, Office of the Governor, TJJJ, HHSC, and the Texas Workforce Commission	Partner state agencies include: the Texas Department of State Health Services, TEA, Office of the Governor, TJJJ, HHSC, and the Texas Workforce Commission

\* Data only available annually

\*\* Source: DFPS Data Book

\*\*\* Source: *Office of Child Safety 2022 Child Maltreatment Fatalities and Near Fatalities Report*

### **Strategy 1.2a Lead: Claire Hall**

**Strategy 1.2a: To increase public awareness of risk factors, protective factors, and interventions in order to prevent delinquency and child abuse/neglect, while also improving the capacity to identify, report, recover, and restore children and youth who are trafficked or at risk of trafficking through targeted prevention activities.**

**Rationale:** Research has identified risk factors that contribute to an increased likelihood of child maltreatment and/or juvenile delinquency, and conversely, protective factors that protect children from maltreatment and reduce youth’s engagement in delinquency by strengthening the child, their family, and communities. PEI invests in primary and secondary prevention programs and services to reduce risk factors and promote protective factors and resiliency in children, youth, families, and communities. These programs strive to prevent entry into the Texas child welfare and juvenile justice systems.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Create/disseminate child abuse prevention awareness calendar.	Annually	In fiscal year 2023, DFPS published, printed, and distributed 600,000-child abuse prevention awareness calendars for providers and communities at no cost to the providers. This is an annual project.
b. Promote infant safe sleep awareness, water safety, and hot car campaigns.	Annually and ongoing thereafter	<p>The DFPS Office of Child Safety works closely with the PEI training division to provide training on topics such as safe sleep practices, water safety, safe sleep week, and hot car safety. Texas' Safe Sleep Campaign brings together the work of the DFPS Office of Child Safety to understand child fatalities and near fatalities and the need for safe sleep education. The <a href="#">safe sleep social media toolkit</a> encourages participation in Safe Sleep Week (March 21-25) and provides daily messages customizable to local organizations and communities. In addition, PEI continues to produce safe sleep infant onesies and brochures for order during safe sleep week. Individual families may order them, and local providers use them as an outreach tool to connect with families and teach about safe sleep. The Office of Child Safety, in partnership with PEI's Safe Sleep Continuous Quality Improvement statewide group, developed a safe sleep training for providers, presented at the annual Partners in Prevention conference in September 2022 and virtually in March 2023. This training brings together concepts of motivational interviewing and direct service strategies to address barriers to safe sleep practices.</p> <p>PEI makes weekly posts to GetParentingTips.com's Facebook and Instagram social media platforms promoting safe sleep and water safety information and other injury prevention and safety awareness.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
c. Enhance and promote statewide child abuse prevention campaign.	Annually and ongoing thereafter	PEI continued to raise awareness about child abuse, as it provides schools, hospitals, daycare facilities, and other community organizations with posters to display and practice tip cards to distribute upon request and free of charge. Awareness is also addressed each April during Child Abuse Prevention Month, each May during Foster Care Month, and each November during Adoption Month at events all over Texas. Promotion continued on the <a href="https://www.getparentingtips.com">https://www.getparentingtips.com</a> . The site provides up-to-date tips, articles, information, and resources for handling the challenges of parenting, managing stress, and keeping children safe and healthy at all stages of development from prenatal to adolescent years, as well as continues to support Texas families during the COVID-19 outbreak. PEI and DFPS Communications continued to develop video resources for parents on the GetParentingTips.com platform, with topics covering <a href="#">how to manage parenting stress</a> and <a href="#">building a family support system</a> . PEI sourced, edited, and published two new articles monthly for GetParentingTips.com. Additionally, PEI promoted online resources during annual Partners in Prevention conference and created a webinar/virtual tour of GetParentingTips.com website.
d. Build awareness of Child Abuse Prevention Month to the public and stakeholders.	Annually (April)	Child Abuse Awareness Month plans include a second annual event held at the Texas state capitol on April 25, 2023, which brought together community stakeholders, prevention professionals, and legislators to recognize the critical work being done across the state to meet families upstream. PEI created and promoted a Child Abuse Prevention Social Media Toolkit with messages, samples, and imagery for internal and external stakeholders. PEI also promoted Child Abuse Awareness Month via PEI newsletters, social media, , and website worked with DFPS Communications and the Office of the Governor to draft a Governor’s Proclamation on Child Abuse Prevention Month.
e. Coordinate with HTCE to build awareness of Human Trafficking Prevention Month with the public and stakeholders.	Annually (January) and ongoing thereafter	PEI promoted human trafficking awareness via <i>PEI Grantee News</i> and <i>PEI Community News</i> . A quarterly newsletter, <i>PEI Grantee News</i> includes provider updates, training opportunities, and resources. <i>PEI Community News</i> is a monthly newsletter for all persons signed up to receive PEI-related news. PEI continued cross-collaboration at HTCE and PEI annual conferences. This year PEI offered a four-hour intensive session titled <i>Domestic Familial Trafficking: Stark Realities and Service Provision</i> at its annual Partners In Prevention conference. The session covered the guiding principles for agencies serving survivors of human trafficking to aid in victim identification, ethical service provision, and improving organizational capacity for serving all survivors of human trafficking, including familial trafficking.

**Objective 1.3: Expand Alternative Response philosophy into traditional investigations – Jerome Green**

**Rationale:** Solution-focused practice and family engagement skills proved effective in obtaining quality work with families as alternative response was implemented. By using solution-focused practice and engaging families differently, caseworkers gathered more pertinent child safety information from families and assisted development and utilization of the family support networks. Engagement strategies resulted in families becoming more invested in the safety of their own children and the parents working alongside the caseworkers as a team. Additionally, a majority of families reported being more satisfied with the alternative response approach and felt they were able to participate in developing solutions or selecting services.

**Expected Outcomes**

- Caseworkers and managers will know how to use solution-focused practice when working cases;
- Information reflected in case files will be more family-focused through use of engagement tools, solution-focused questions, and input from families in the creation of plans and selection of services;
- Caseworkers will show effective family engagement skills through use of engagement tools, solution-focused questions, and partnering with families throughout the casework process; and
- Managers will use the parallel process by demonstrating use of solution-focused practice in case staffing, case direction, and leadership of their staff.

**Outcome Measures**

- Caseworkers show increased solution-focused practice and family engagement;
- Supervisors model the parallel process, thereby increasing the critical thinking, decision-making skills, and competency of their staff; and

All staff understand and use the parallel process.

Interim Benchmark/Milestone	Target Completion
Strengthen caseworker training to include solution-focused practice and focus on family engagement and assessment skills.	Ongoing
Promote Learning Workshops as a support service available to all CPI staff to support development and transference of skills.	Ongoing
Utilize monthly webinars for all CPI staff to provide ongoing training of solution-focused practice and family engagement skills.	Ongoing

Interim Benchmark/Milestone	Target Completion
Disseminate solution-focused practice and engagement tools to all CPI staff. Information will be made available on the Safety Net.	Ongoing

**Summary**

To support the use of solution-focused practice, the DFPS internal training system began integrating solution-focused questions, interviewing, and practice into a majority of curriculums offered to staff as the model for how to engage with families. For newly hired staff, basic training focuses on solution-focused practice and family engagement by providing solution-focused interviewing instruction, and practice activities. Advanced investigation courses have incorporated solution-focused interviewing techniques and require demonstration of effective engagement skills to advance to the next level of certification. Supervisor training and strengths-based supervision courses now include solution-focused practice in reference to developing staff and increasing their critical thinking skills.

In some areas of the state, Investigations staff have begun participating in learning workshops on solution-focused practice and integration techniques. Supervisors reported more in-depth assessments are occurring and an increase in staff’s ability to obtain a holistic view that includes historical factors, current behaviors and issues, and future plans for ongoing safety and reduction of risk. Staff supports families in creating sustainable plans that address current and future worries and needs. For staff who work both investigations and alternative response cases, they have self-reported using family engagement skills and tools learned in alternative response with families. CPI piloted a program with a group of Investigation managers focused on supervising using a solution-focused, collaborative engagement approach with staff. Supervisors reported they were supporting their staff by utilizing solution-focused questions, encouraging critical thinking and feeling more satisfaction and motivation in their work. In fiscal year 2023 saw an increase in training staff who primarily work traditional investigations in alternative response practice which promotes engagement and solution-focused work with families.

This year, CPI began implementing a *CPI Engagement Series* training delivered to all CPI caseworkers and managers in CPI which focuses on the foundational principles of engagement, its importance, and use of engagement tools with adults, youth, and children.

**Strategy 1.3a Lead: Jerome Green**

**Strategy 1.3a: Develop a family engagement approach to working traditional investigations involving children who experience abuse and neglect.**

**Rationale:** Alternative response practice utilizes multiple family engagement techniques to address reports of alleged child abuse and neglect with a flexible, family-centered approach while still focusing on child safety. Alternative response allows a family to perceive CPI involvement as less adversarial and more collaborative by implementing techniques in family engagement and solution-focused practices into traditional investigation protocols. A strengthened family engagement approach will improve agency collaboration with the family needed to address critical child safety, permanency, and well-being outcomes.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop protocols and practices for investigative caseworkers and supervisors to use alternative response practices and tools during an investigation.	February 2023	Now that alternative response has been implemented statewide, CPI is using ongoing efforts to customize trainings in areas where protocols and practices could be updated to support engagement and solution-focused practice for all staff. Learning Workshops were implemented and facilitated statewide by program specialists to all CPI staff, including Investigations and Alternative Response workers, supervisors and regional leadership. CPI program specialists conducted on-site training opportunities for all regions throughout the year. Learning Workshops consist of the presentation of a specific training topic followed by a discussion period to answer questions and embed the learning with staff. All regions receive the Learning Workshops approximately three times per year to enhance understanding and practice of engagement techniques with all investigative staff. An <i>Investigation Engagement Guide</i> developed this year provides guidance and practice expectations on how to incorporate engagement and solution-focused practice in each investigation stage. This document is being provided to staff as part of the <i>CPI Engagement Series</i> .
b. Develop strategic plan to intentionally incorporate an alternative response family engagement philosophy and methodology into all	August 2024	Implementation of the <i>CPI Engagement Series</i> began in February 2022 and will continue to roll out across the state by regions through fiscal year 2024. Upon completion of the training, staff will go through alternative response trainings to utilize engagement skills with families across traditional investigations and alternative response cases.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
agency training for both workers and supervisors.		
c. Develop a curriculum focused on child safety with family engagement as a component to a collaborative approach.	Completed	The two-part <i>CPI Investigation Series</i> was developed for Investigations staff to facilitate their use of family engagement techniques and a collaborative approach when working investigations. The curriculum was approved in May 2022, and the training is being delivered to CPI staff.

**Strategy 1.3b Lead: Linsay Tomlison**

**Strategy 1.3b: Expand the Adaptive Coaching Institute for management levels of CPI.**

**Rationale:** The Texas Adaptive Coaching Program offers coaches the opportunity to reflect on their abilities as a leader and identify goals that will increase their effectiveness.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. CPI will explore providing training on coach- like, person-centered leadership to all regional directors and program administrators.	August 2021	This action step has been completed.
b. CPI will create an Adaptive Coaching Institute within DFPS.	January 2022	This action step has been completed.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
The Institute will offer trainings and opportunities for managers to develop more advanced leadership skills.		

**Objective 1.4: Promote high quality standards for investigations – Natalie Reeves**

**Rationale:** Child safety is the central focus of investigative practice. The foundation of quality investigations is the education, development, support, and retention of staff. Direct service staff (caseworker, manager, and staff in supporting roles) are the medium through which investigations are made and families served. To assist staff in completing high quality investigations, DFPS provides supports such as technological resources, trainings, supervision support, reporting systems, and policies that allow staff to better serve families. In addition, DFPS collaborates with outside agencies that provide feedback on how to continue to improve the quality of investigations.

**Expected Outcomes**

- Caseworkers will exhibit the necessary critical thinking skills and ability to detect child abuse and neglect to effectively intervene with families to assure child safety;
- Caseworkers will demonstrate effective family engagement skills (CFSR PIP Goal 4);
- Staff will have access to expert consultations as needed to guide and develop practice skills; and
- Support services such as training, case reviews, and data will be aligned to support quality investigations.

**Outcome Measures**

- Recidivism will decrease;
- Staff turnover will continue to decrease.; (CFSR PIP Goal 1); and
- Staff will have access to real time data to help them manage tasks and workloads.

Interim Benchmark/Milestone	Target Completion
CPI will hire, develop, and retain a strong workforce (CFSR PIP Goal 1).	Ongoing
Caseworker training will be strengthened to better support strong practice skills including family engagement and assessment skills (CFSR PIP Goal 6).	Ongoing
Training for managers will reinforce the Texas CPI model of supervision (CFSR PIP Goal 4).	Ongoing
Managers will develop skills in using technology and data to assist in ensuring critical safety tasks are completed timely.	Ongoing
CPI will continue to use the master investigators to respond to workload and staff development needs across the state.	Ongoing
The expertise of the child safety specialists will be used in improving response to repeat child maltreatment for the most vulnerable children.	Ongoing
Coordination with HTCE will improve investigator capacity to identify, report, recover, and restore children and youth who are trafficked.	Ongoing
The specialty and certification training processes for CPI staff will be enhanced to include human trafficking.	Ongoing

### Summary

Staff CPI employee levels have decreased this quarter as a result of high turnover rates. The lower number of case assignable staff have contributed to higher workloads and additional stress.

CPI has developed various statewide and regional strategies to assist staff with their high caseloads. Some of these include special and master investigators assigned to assist with caseload needs. CPI state office program specialists have assisted with case staffing. Staff can access child safety specialists for consultation on high-risk cases early and throughout the investigation. These consultations use a structured case mapping format that helps staff think through critical decision points in cases and identify strategies for ensuring child safety.

CPI leadership continues to develop proficiencies in using data to help promote quality investigations. Regional leadership teams meet quarterly to review their own data, identify issues and trends reflected in the data, and develop strategies to target the issues most relevant to quality investigations.

## CPI Employee Turnover Comparison Report Summary as of Fiscal Year 2023, Quarter 2

Functional Title	Turnover Rate FY 2021	Turnover Rate FY 2022	Turnover Rate FY 2023	Percentage Change FY 2021 to FY 2023, Quarter 2
CPI Workers	43.1%	45.7%	40.1%	-12.2%
CPI Supervisors	14.6%	14.9%	12.0%	-19.7%
CPI Program Directors	34.9%	37.7%	34.1%	-9.7%

### Strategy 1.4a Lead: Tracye Risener

#### **Strategy 1.4a: Continuous quality improvement utilizing the Child Safety Specialist expertise.**

**Rationale:** Child safety specialists review a high volume of cases to strengthen risk and safety assessment and provide feedback on safety-related issues, including correct usage of safety and risk assessments. Additionally, in some areas these specialty staff are able to use group supervision to help develop or strengthen critical thinking skills in direct delivery staff and promote a thorough understanding of the family dynamics that affect child safety.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and implement a process to incorporate the results from the child safety specialists' reviews identifying trends and patterns to be shared across the state.	Ongoing	<p>A monthly dashboard report was developed and distributed to accountability child safety specialists, as well as CPI state and regional management to identify trends and patterns. A new child safety specialist survey and tableau dashboard is still in development that will further improve the ability to identify trends and patterns. Due to policy changes and further review of the current dashboard system, a more enhanced system was needed.</p> <p>The Data Systems and Improvement Analytics and Evaluation team, accountability child safety specialists, and CPI staff collaborated on survey changes. An enhanced dashboard with a new data application and incorporation of the survey is expected to provide more detailed data regarding cases reviewed by child safety specialists for secondary approval. Enhanced training to ensure better understanding of the system and encourage further use of the tableau dashboard will increase identification of trends and patterns within each region, program area, and unit.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		Once development is complete and the new survey and dashboard in use, the lead child safety specialists, Regional Systems Improvement team, and CPI regional management will discuss results and identify action items. Until then, the current dashboard report is distributed monthly to the accountability child safety specialists and CPI regional and state management to discuss trends and patterns in the review of Investigations.
b. Expand capacity for child safety specialist verbal consultation on high-risk cases across the state.	Ongoing	Verbal consultation through case mapping has been used statewide since September 2020. Currently child safety specialists complete case mapping during multiple referral staffings for victim child(ren) under 4 years of age and other high-risk staffings on investigations in all regions across the state. The pilot project was completed; however, child safety specialists continue to complete case mappings.

**Strategy 1.4b Lead: Angela Pie**

**Strategy 1.4b: CPI caseworker training will be strengthened to better support strong practice skills including family engagement and assessment skills.**

**Rationale:** To achieve the outcomes for children, youth, and families, a professional and competent workforce is necessary, requiring. CPI provide training that promotes best practice.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and conduct trainings that facilitate practice changes for CPI investigations while adhering to the Texas DFPS Practice Model	Ongoing	The CPI best practice specialist delivers virtual trainings and in-person presentations throughout the state to discuss practice changes for CPI investigations and ensure changes are aligned with the DFPS Practice Model. The CPI best practice specialist attended staff meetings and local Investigation Universities to support regional leadership while ensuring messages delivered to staff are aligned with the DFPS Practice Model, as well as several conferences, including CRIMES Against Children, to develop and grow child protection knowledge and expertise. The CPI best practice specialist continues to

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
values.		<p>identify ways to increase education and awareness of practice changes around the country helpful for Texas and focus on staff and leadership development statewide.</p> <p>The CPI best practice specialist and training liaison continue to liaise with the DFPS CLOE training team to review and develop curriculum designed to facilitate practice changes in investigations while adhering to the Texas DFPS Practice Model. The CPI best practice specialist reviews current trainings designed for CPI staff for enhancement and to ensure staff can translate training lessons into practice in the field. The CPI best practice specialist and the training liaison update curriculum and/or develop new curriculum, as well as deliver additional trainings to meet identified gaps or deficiencies based on regional needs. The CPI best practice specialist provides trainings and workshops to staff both in person and virtually statewide.</p>
b. Support the Texas CPI model of supervision by expanding the use of case mapping and consultations to improve critical thinking skills and safety outcomes.	Ongoing	<p>A two-day supervisor critical thinking course to improve practice by identifying and improving the participant's own critical thinking skills is offered statewide. CLOE and CPI continue to focus on increasing trainer capacity for this course to ensure the training can be provided to all supervisors. The CPI best practice specialist and the training liaison focus on expanding the current model of supervision by providing regional specific case mapping and consultation trainings to improve critical thinking. CPI continues to develop and implement transfer of knowledge activities to the certification process for caseworkers and supervisors. The CPI best practice specialist and training liaison will continue to focus on developing curriculum designed to transfer practice skills to the field while ensuring safety and practice outcomes.</p>
c. Re-evaluate the current training model for new caseworkers and the mentoring program. The current model combines traditional classroom training with field-based training and mentoring, using a competency-based model to adequately prepare new caseworkers for their duties and reduce new	July 2023	<p>CPI and CLOE implemented a new training model aligned with the needs and requests of staff and leadership. CPI is developing new and existing mentors to adequately prepare new caseworkers to complete their job duties to improve retention through adequate support and training. Based on an audit of the current mentor program, CPI revamped and implemented changes in September 2022. CPI is currently auditing the revised training model to make needed enhancements to ensure protégés are provided the most effective and efficient training model. Mentor program specialists continue to support the mentoring program through the oversight provided for both the protégés and mentors in the regions. CPI continues to develop and implement rubrics for use by mentors and/or supervisors to apply a consistent method to effectively evaluate protégés across the state. Mentors are provided with quarterly trainings to develop and increase their child protection expertise, as they model the way for protégés.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
hire turnover rates.		

**Strategy 1.4c Lead: Sierra Fischer**

**Strategy 1.4c: Regional systems improvement specialists will provide data reports as a means to target actions in CPI regional business plans**

**Rationale:** Regional managers will utilize data and regional systems improvement specialists to assist in gathering and analyzing child safety performance data and reports. Using the specialists’ expertise and data will enable managers to target their efforts toward effective strategies, understand trends impacting outcomes, and reallocate support and resources as needed.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Regional systems improvement specialists will provide data reports to assist DFPS staff in making proactive case decisions, improve quality, and ensure critical tasks are completed timely.	Quarterly	Regional systems improvement specialists provide weekly and monthly data to regional managers. The data is focused on outcomes outlined in regional business plans. The CPI director of field receives monthly updates on progress made by the regional areas from the CPI director of regional systems improvement.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
b. Regional managers will provide quarterly reports, documenting key regional trends and patterns for each region.	Quarterly	Regional managers and regional systems improvement specialists meet regularly to identify needs and improvements. Quarterly meetings include a review of progress toward metrics, newly noted trends, and update to strategies outlined for improvement of timelines and quality.
c. Regional managers will review a specialized report identifying which children have had initial contacts (known by staff as the “31 report”) to ensure children are being seen.	Weekly	Regional managers continue to review the “31 report”, identifying trends and patterns needing to be addressed in their areas. Weekly reviews are conducted in each region to ensure staff visit children timely. Tracking occurs daily on children who have yet to be located. Review of the 31 report allows management to get data in real time to ensure children seen. If data shows a negative trend in timely contact or children not being seen, a targeted approach with the worker, supervisor, and program is implemented.
d. Master investigations staff will use the regional systems improvement report to guide decision-making for deployments to assist regions with critical case tasks.	Monthly	Master investigations staff utilize the regional systems improvement report to guide deployment and resources to areas of need. Master investigations staff utilize the monthly briefings provided by the Regional Systems Improvement team, identifying regional trends and patterns needing improvement. They work with the regional systems improvement specialists during deployment to a region to help identify areas of focus and strategies for assistance.

**Strategy 1.4d Lead: Blanca Denise Lance**

**Strategy 1.4d: Coordinate with HTCE on improving investigator capacity to identify, report, recover, and restore children and youth who are trafficked and enhance the specialty and certification training**

**processes for CPI staff to include human trafficking.**

**Rationale:** Child safety is the central focus of investigative practice. The foundation of quality investigations is the education, development, support, and retention of staff. Direct service staff (i.e., caseworker, manager, and staff in supporting roles) are the medium through which investigations are made and families are served. To assist staff in completing high-quality investigations, DFPS provides supports such as technological resources, trainings, supervision support, reporting systems, and policies that allow staff to better serve families. In addition, DFPS collaborates with outside agencies to provide feedback on investigation quality improvement efforts.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. HTCE will continue to monitor and report CPI staff compliance for completion of the mandatory DFPS Human Trafficking Training featuring: <i>Be the One in the Fight Against Trafficking</i> .	Ongoing	As of February 2023, a total of 23,289 DFPS staff have been trained in <i>Be the One in the Fight Against Human Trafficking</i> . CPI has a 99 percent compliance rating and works diligently to ensure this level of compliance is maintained on an ongoing basis.
b. HTCE will update child protection professional development human trafficking content for new staff.	Ongoing until completed	In March 2021, HTCE developed <i>Foundations of Human Trafficking</i> training and worked with DFPS CLOE to update the child protective professional development and incorporate into new employee training. <i>Foundations of Human Trafficking</i> is a mandatory training for all existing CPI and CPS staff and has been fully integrated into child protective professional development for new staff since October 2019. Due to investigative staffing needs, full implementation the training for all CPI staff hired prior to October 2019 was delayed. Additional courses will be scheduled to allow staff the time to complete this mandatory training without impacting primary investigative duties. Less than 897 CPI staff remain to be trained.
c. HTCE will develop a DFPS Care Coordination Toolkit to guide staff in community engagement on the	December 2023	HTCE created <i>Learning Stream – Computer Based Training, DFPS Protocol for Care Coordination Overview 0000799 (Overview 0799)</i> to provide an understanding of the DFPS philosophy for children and youth with missing and runaway episodes and sex trafficking victimization, gain a working knowledge of the DFPS Protocol for Care Coordination, and inform staff assisting child and youth victims on new available resources. The target audience includes all worker- level and supervisor-level staff in CPI, FBSS, and

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
development and implementation of Care Coordination Teams for victims of sex trafficking.		<p>conservatorship. NOTE: This course is not intended for Bexar, Dallas, Harris, Tarrant, and Travis counties staff who operate under the specialized DFPS Human Trafficking Protocol.</p> <p>HTCE created an Overview on Understanding Human Trafficking Resources tip sheets that included Care Coordination teams, human trafficking advocate agencies, and the Commercial Sexual Exploitation-Identification Tool. The tip sheets were provided to CPI and CPS staff in March 2022 to support staff in understanding their expectations in utilizing these resources.</p> <p>Updates to the <i>Care Coordination Overview 0000799 (Overview 0799)</i> training were postponed allowing time for the development of the Texas Care Coordination for Commercially Sexually Exploited Youth Logic Model. Since April 2022, HTCE has worked collaboratively with the Office of the Governor's Child Sex Trafficking team and Children's Advocacy Centers of Texas to develop a unified approach to care coordination via a Logic Model. Currently the team is working on the associated implementation packet to support both developing and existing teams in aligning with the Logic Model.</p>
d. HTCE will coordinate with CPI and CLOE to analyze and develop a work plan to enhance the specialty and certification training processes for CPI staff by including human trafficking content.	August 2023	HTCE is working to develop a series of elective human trafficking courses for staff when working to comply with elective requirements for certification. In August 2022, a series of region-specific trainings were deployed to build a stronger understanding of what each commercially sexually exploited youth advocate agency has to offer to children, youth, and young adults who are survivors of trafficking. HTCE is developing a course for on familial trafficking to add to the elective listing. Once this course is available, the next elective course will be identified.
e. HTCE will develop a multi-division workgroup to study reports of sex and labor trafficking closed without investigation.	December 2022	In Fall 2021, existing policies were analyzed and known case reading tools researched to inform the development of the case reading tool for this project. The initial version of case reading tools was implemented in Summer 2022. In Fall 2022, a master-level student intern completed a sample case read on cases closed without assignment. which led to insights on how to improve future case reads. Once again, policy updates to administration closures requires an updated case read to identify current trends.

**Objective 1.5: DFPS will strengthen the provision of FBSS and practices to engage families across the state to better achieve safety and child and family well-being outcomes. – Teresa Young**

**Rationale:** FBSS is designed to support children safely in their homes by strengthening the family's ability to protect their child and reduce safety dangers. FBSS provides a variety of services directly by CPS staff, through contracted service providers or referrals to community-based providers. Traditionally, services have included, but are not limited to, family counseling, crisis intervention, substance use treatment, and domestic violence intervention. FBSS caseworkers may also provide one-on-one parenting and homemaker skill trainings in areas where community-based services are not available. Texas has adopted assessment tools to evaluate the strengths and needs of children and families and determine the services necessary to create a safe home environment and enable children to remain safely with their parents when possible.

**Expected Outcomes**

- Strengthen FBSS service plan development and ongoing evaluation of safety by focusing on proper use of the Family Strengths and Needs Assessment, Safety Assessment, and Risk Reassessment tools (CFSR PIP Goal 3);
- Improve casework practice and staff competency to enhance safety, permanency, and well-being outcomes;
- Prevent removal and work with families to keep children safe in their homes;
- Make data-driven decisions to decrease recidivism in FBSS cases;
- Expand and enhance services to families in areas historically lacking resources by providing services through a single entity contracting with DFPS and serving Region 10 (El Paso) (CFSR PIP Goal 3); and
- Enhance family engagement and reduce recidivism with families who are participating in the Nurturing Parenting program facilitated by FBSS staff in five pilot sites.

**Outcome Measures**

- Measure data reports to evaluate timely family plans of service and timely contacts with families;
- Measure recidivism rates through evaluation of data warehouse reports;
- Monitor and evaluate quality case documentation through quality assurance and program director case reads;
- Review data reports, case review results, and quarterly monitoring outcomes to evaluate progress for the Region 10 Family Services Contract pilot to assess improvements to child safety, permanency, and well-being for children and youth, and pilot expansion to other areas of the state; and
- Evaluate outcomes for the five FBSS units providing the Nurturing Parent program to families under their care.

Interim Benchmark/Milestone	Target Completion
Re-training all FBSS staff on use of the Family Strengths and Needs Assessment, Safety Assessment, and Risk Reassessment, as these assessment tools will be automated into the DFPS IMPACT system in the IMPACT modernization second release.	Completed Fall 2019
Enhance the specialty and certification training processes for FBSS caseworkers to include more in-depth training on appropriate and timely service plans, enhanced family engagement, and elevating child safety.	Completed September 2020
Monitor improving recidivism through the use and review of Data Warehouse reports. Analyze input from qualitative “live read” case reviews for FBSS in all regions and use the results to enhance caseworker meetings, supervisor coaching, as well as integrate findings of aggregate trends into regional improvements.	Ongoing
Develop new Data Warehouse reports to capture frequency of contact and risk assessment data related to newly established and enhanced FBSS policy and provide outcome measures to regional staff to be integrated into supervision and casework practices improvement.	Ongoing
Monitor and evaluate the family services contractor, HomeSAFE, for quality documentation, timely services, child safety, and family engagement performance measures through case reviews, quarterly data evaluation, and contract performance monitoring.	Completed August 2020
Monitor and evaluate casework performance and recidivism data for families who participated in the Nurturing Parent pilot program.	Completed August 2020
Coordinate with HTCE to improve FBSS capacity to identify, report, recover, and restore children and youth who are trafficked, as well as FBSS capacity to identify, report, recover, restore children and youth who are trafficked or at risk of trafficking.	Ongoing

### Summary

Enhanced family engagement, known as “concurrent stages”, continues to affect caseload data, removal rates, and recidivism. Another practice improvement was initiated in FBSS in early 2022, strengthening the work caseworkers do with families. This improved casework resulted in positive outcomes for families and staff. Staff across the state were trained on identifying families appropriate for FBSS versus those who have a support network or access to community resources to ensure child safety. Staff working directly with families to provide needed services result in much better outcomes than staff “monitoring” families. There has been a steady decrease in turnover, caseloads, removals, recidivism, and a decrease in child fatalities. FBSS caseloads have declined from fiscal years 2021 to 2022 from 8.8 percent to 4.8 percent, respectively, as the improved practice supports more timely engagement with families and quicker assessment for service referrals and need for any ongoing support. Removals continued to trend downward to the current rate of 5.4 percent to date. A small, but

evident decrease in recidivism remains trending downward as well from fiscal years 2021 to 2022 from 8.2 percent to 7.3 percent, respectively. FBSS State Office team and the quality assurance specialist updated their case read tool to support evaluation of the policy and practice changes. The case reviews support program improvement, and reports have been developed to capture data directly related to performance which allows supervisors to enhance casework on a timely basis. With FBSS managers statewide, a FBSS manager case review tool was further enhanced to assess and capture quality casework and supervision. The results of the cases read by regional FBSS managers directly impacts practice improvements.

FBSS is currently updating policy to enhance the number of in-person visits required with parents and children to ensure family engagement, increase child safety and quality of work, as well as, updating the FAM10 data report to accurately reflect the correct number of contacts completed to coincide with the new policy. Implementation of legislation passed by the 87th Texas Legislature requiring pilot projects with evidence- based services is provided to families who are court-ordered to participate in services.

**Strategy 1.5a Lead: Teresa Young**

**Strategy 1.5a: Evaluate and improve training for caseworkers and supervisors to support professional development.**

**Rationale:** Professional development is critical to supporting a healthy workforce, thereby strengthening services provided to children and families.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Plan and hold an FBSS leadership conference dedicated to family and child engagement	September 2019	All FBSS managers attended a leadership conference focused on empowering supervisors to change the current practice around how caseworkers engage DFPS children and families.
b. Improve FBSS caseworker specialty certification training.	October 2019	FBSS implemented updated training certification track with newly developed courses required for FBSS caseworkers' ongoing professional development.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
c. Plan and hold an FBSS Leadership Conference dedicated to substance use, mental health, supervision, and quality casework.	January 2020	The FBSS leadership conference trained on topics such as substance use, mental health, and supervision, as it relates to ensuring quality casework.
d. Review and improve FBSS caseworker new hire CPS professional development training.	October 2021	FBSS enhanced the CPS professional development training with modifications to FBSS specialty and the FBSS Individual Training Plan.
e. Review and improve FBSS supervisor training.	October 2022	The statewide training council is reviewing the current supervisor trainings and will be making recommendations for changes to the training division.

**Strategy 1.5b Lead: Teresa Young**

**Strategy 1.5b: Modify and improve data reports to capture measures that reflect changes in policy, the IMPACT system, and casework practices. (e.g., improve data reports and management tools). (Training)**

**Rationale:** Accurate data and management reports are critical to management in order to encourage their use, strengthen monitoring, and implement course correction if performance issues are noted.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Roll out of updated FAM29 data report that accurately tracks frequency of contacts with children and parents.	October 2019	FBSS redesigned the FAM29 data report to accurately capture the required frequency of contact with children and parents based on risk level per updated policy.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
b. Update FAM7/10 data report to accurately capture aggregate in-person contact data.	June 2022	FBSS redesigned the FAM7/10 data report to accurately capture the required frequency of contact with children and parents based on risk level per updated policy.
c. Develop risk reassessment data report.	June 2021	FBSS redesigned the risk assessment data report to accurately capture the required frequency of contact with children and parents based on risk level per updated policy.
d. Update FAM15 data report to accurately capture timeliness and services provided on Family Plans of Service.	January 2023	FBSS redesigned the FAM15 data report to accurately capture the required frequency of contact with children and parents based on risk level per updated policy.

**Strategy 1.5c Lead: Teresa Young**

**Strategy 1.5c: Monitor and evaluate outcomes to gauge the effectiveness of various services in improving child and family well-being measures. (Evaluation)**

**Rationale:** Improving services to families and children includes continuous performance reviews of utilized services or programs

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Support and evaluate FBSS Outsourcing Family	August 2020	CPS conducted regular training and assistance meetings with the contractor and quarterly onsite monitoring and review of contractor performance.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
Services Contract Pilot R10.		
b. Support and evaluate Nurturing Parenting program pilot.	October 2020	Monthly practice support calls with field staff who provide the Nurturing Parenting program continue. Pilot completed August 2020.
c. Create quarterly reports for high-risk FBSS case reviews that evaluate casework quality.	Ongoing	Continued case reads provide quarterly reports, and data evaluation informs practice improvement efforts. In October 2020, a new case read tool was implemented, and quarterly reports became targeted monthly reports to evaluate implementation of new concurrent stages policy and practice. Beginning in June 2021, monthly case reads inform quarterly reports focused on quality case work and supervision.

**Strategy 1.5d Lead: Blanca Denise Lance**

**Strategy 1.5d: Coordinate with HTCE to improve FBSS capacity to identify, report, recover, and restore children and youth who are trafficked or at risk of trafficking.**

**Rationale:** FBSS is designed to support children safely in their homes by strengthening the family’s ability to protect their child and reduce safety dangers. FBSS provides a variety of services directly by CPS staff, through contracted service providers or referrals to community-based providers. Traditionally, services have included, but are not limited to, family counseling, crisis intervention, substance use treatment, and domestic violence intervention. FBSS caseworkers may also provide one-on-one parenting and homemaker skill trainings in areas where community-based services are not available. Texas has adopted assessment tools to evaluate the strengths and needs of children and families and determine the services necessary to create a safe home environment and enable children to remain safely with their parents when possible.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. HTCE will continue to monitor and report FBSS staff compliance for the mandatory DFPS human trafficking training, featuring <i>Be the One in the Fight Against Human Trafficking</i> .	Ongoing	As of February 2023, a total of 23,289 DFPS staff have been trained in <i>Be the One in the Fight Against Human Trafficking</i> (total includes former staff). FBSS has maintained a 99 percent compliance rating and works diligently to ensure this level of compliance is maintained on an ongoing basis.
b. HTCE will update child protection professional development human trafficking content for new staff.	Ongoing until completed	The mandatory <i>Foundations of Human Trafficking</i> training was fully integrated into child protective professional development for new staff in fiscal year 2020. Full implementation of the training for all staff hired prior to October 2019 was delayed due to staffing needs. Additional courses will continue to be scheduled to allow staff the time to complete this mandatory training without impacting primary duties. Less than 121 FBSS staff remain to be trained.
c. HTCE will work with FBSS to develop a survey to capture human trafficking trends for FBSS staff and develop a work plan to support their needs.	December 2023	<p>The HTCE director met with regional leadership after completion of a staff and supervisors survey to provide and gather information. To support FBSS understanding of human trafficking identifiers and trends, full compliance with <i>Foundations of Human Trafficking</i> mandatory training was recommended.</p> <p>Additionally, HTCE created overviews on understanding human trafficking resources tip sheets that included Care Coordination teams, human trafficking advocate agencies, and the Commercial Sexual Exploitation-Identification Tool. The tip sheets were provided to staff in March 2022 to support staff in understanding their expectations in utilizing these resources.</p> <p>A planned updated survey for Fall 2022 was postponed due to HTCE staffing changes and delay in full implementation of <i>Foundations of Human Trafficking</i>. In Fall 2023, a new survey will be developed specifically for FBSS supervisors to determine the effectiveness of policy updates, <i>Foundations of Human Trafficking</i> training, and the tip sheets in supporting FBSS needs with regards to human trafficking.</p> <p>Updates to the <i>Care Coordination Overview 0000799 (Overview 0799)</i> training were postponed allowing time for the development of the Texas Care Coordination for Commercially Sexually Exploited Youth Logic Model. Since April 26, 2022, HTCE has</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		worked collaboratively with the Office of the Governor's Child Sex Trafficking team and Children's Advocacy Centers of Texas to develop a unified approach to care coordination via a Logic Model. Currently the team is working on the associated implementation packet to support developing new and existing teams in aligning with the Logic Model.

**Objective 1.6: Reduce the number of children in Permanent Managing Conservatorship (CFSR PIP Goal 5) – Rocky Hensarling**

**Rationale:** Exiting children to a permanent family setting (positive permanency) improves overall child well-being. DFPS will continue efforts to achieve positive permanency for children. The preferred permanency goals for children consist of: (1) exiting a child to a family; and (2) transferring legal custody to that family.

**Expected Outcomes**

- More robust clinical practice around the topic of permanency and engagement; and
- Increased collaboration with families and stakeholders.

**Outcome Measures**

- Decrease in the number and percentage of children in DFPS permanent managing conservatorship, based on data regarding the legal status of children in DFPS conservatorship; and
- Increase in exits to positive permanency for children and youth in care over fiscal year.

Interim Benchmark/Milestone	Target Completion
Enhance understanding and awareness of the importance of permanency through values training and collaborative family engagement trainings.	Ongoing
Continue collaboration with the Children's Commission to strengthen understanding by legal stakeholders of the necessity for and impact of timely positive permanency.	Ongoing

Interim Benchmark/Milestone	Target Completion
Continue collaboration with CASA to locate and/or recruit potential permanency resources for children and youth in DFPS temporary and permanent managing conservatorship through collaborative family engagement.	Ongoing

**Summary**

In fiscal year 2022, the percentage of children who emancipated from conservatorship was 6.44 percent (DFPS Data Book: Children Exiting DFPS Legal Custody). Children entering DFPS permanent managing conservatorship increased from 6,810 in fiscal year 2021 to 6,984 in fiscal year 2022 (DFPS Data Book: Legal Statuses Granted During Fiscal Year). There were 9,972 children in DFPS permanent managing conservatorship at the end of fiscal year 2022 (DFPS Data Book: Children in DFPS Legal Responsibility on August 31). DFPS was able to increase the percentage of children who exited to reunification from 32.72 percent in fiscal year 2018 to 34.43 percent in fiscal year 2022.

The CPS Permanency division has worked to develop policy, training, and best practice guidance for conservatorship field staff to more quickly address the need of promoting children and youth exiting DFPS care to positive permanency. To reduce the number of children in permanent managing conservatorship, the CPS Permanency division developed a strategy for identifying characteristics of youth who may require enhanced support and services to exit DFPS conservatorship to positive permanency. Utilizing data, including permanency goal, placement type, and other characteristics, a wraparound case management meeting between DFPS State Office subject matter experts, case management staff, and regional well-being specialists was developed to provide a vehicle for enhanced support to case management staff in planning for and achieving positive permanency. This supports both the goals of decreasing the number and percentage of children in DFPS permanent managing conservatorship and increasing exits to positive permanency for children and youth in care over the fiscal year.

The CPS Permanency division continues to regularly collaborate with the Children’s Commission and other stakeholders, including CASA and the Parent and Kinship Collaboration Groups. As resource guides, policy, and training are developed, they are provided for review and comment to DFPS partners. Data is shared as needed to ensure partners and stakeholders are aware of the trends, challenges, areas for improvement, and goals affecting children and families served by DFPS. Data on initial primary permanency goals and exits that include historical, cumulative, and recent trends are shared with CPS management monthly.

**Strategy 1.6a Lead: Paul Busby**

**Strategy 1.6a: Enhance understanding of the importance of achieving positive permanency for children in permanent managing conservatorship**

**Rationale:** To improve permanency outcomes for children and reduce the number of children in DFPS permanent managing conservatorship, DFPS staff must understand the importance and impact of positive permanency, including the impact when youth age-out of foster care without a permanent family home.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Provide trainings and information to DFPS staff on the importance of positive permanency for children.	Annually and ongoing thereafter	DFPS continues to provide ongoing information regarding positive permanency for children through conferences, monthly Meeting in A Box, and on the DFPS intranet in the conservatorship and permanency sections. Permanency Values Training is provided several times a year as part of the training required for staff promotion. Development of more staff permanency trainings are planned for the upcoming year. Collaborative family engagement was rolled out to all regions with information on permanency among other focuses. The Practice Model training is available to all CPS staff which provides information on achieving permanency.
b. Consolidate case review and IMPACT data to best identify trends in casework practice; provide the data to each region to show progress related to reducing the numbers of children in DFPS permanent managing conservatorship.	September 2020 and ongoing (quarterly) thereafter	The information from the use of the Conservatorship Case Reading Tool and case review information, as well as IMPACT data help to identify any concerns or barriers in achieving permanency for children, so changes can be made early in the case. The CPS regional system improvement analysts work directly with the regional directors and their leadership team to identify trends and barriers to achieving permanency for children in foster care.
c. Review and evaluate the characteristics of youth who age-out of care to identify trends indicated through data, input from youth, and	September 2024 and ongoing thereafter	Transitional Living Services hosts collaborative meetings with stakeholders to discuss actions to remove barriers to greater participation in both extended foster care in general and supervised independent living overall. A supervised independent living workgroup comprised of both internal and external stakeholders began convening in April 2023 to work on removing some of those barriers.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
case reviews.		
d. Use characteristic information for youth aging-out of care without Extended Foster Care to alter practice approaches and strengthen exits to extended care.	September 2024 and ongoing thereafter	Due to COVID-19, this was temporarily delayed. Workgroups and meeting content can be used to guide practice approaches for foster care youth transitioning into Extended Foster Care. Currently, information available is used to educate youth in making decisions about transitioning to Extended Foster Care through meetings and presentations such as Circle of Supports, teen conferences, PEAKS camp, and aging-out seminars.

**Strategy 1.6b Lead: Rocky Hensarling**

**Strategy 1.6b: Continue to collaborate with external stakeholders to improve permanency outcomes for children and youth and reduce the number of children in DFPS permanent managing conservatorship.**

**Rationale:** DFPS continues to collaborate with external stakeholders to achieve positive permanency for children and youth in DFPS permanent managing conservatorship. It is important for this collaboration to continue with a focus on locating and engaging family and other supportive adults which will increase timely exits from the foster care system.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Collaborate with the Children’s Commission to increase training for judges and specialty courts by sharing data regarding permanency goals, timeliness to exit, and exit types.	December 2020 and annually thereafter	DFPS continues to participate in the annual Judicial Conferences, held each October. These conferences share data regarding permanency outcomes by region and include a conversation between DFPS and the judiciary on improving positive permanency, average time to permanency, and overcoming barriers. Planning for how to effectively use data from the federal Texas Data Profile and discuss regional and statewide trends in the October 2023 conference began in May 2023.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
b. Work with CASA to expand collaborative family engagement throughout additional counties in Texas.	September 2022	DFPS continues to collaborate with CASA on expanding collaborative family engagement to all regions. Collaborative family engagement was available in 10 of the 11 DFPS regions and included 70 percent of the CASA network. However, in fiscal year 2023, expansion into additional areas resulted in collaborative family engagement established in all DFPS regions and nearly 120 counties.
c. Develop and provide specialized ongoing training to staff on concurrent planning, utilizing data from case reviews, and IMPACT.	September 2020	The <i>Permanency Planning Resource Guide</i> was revised and enhanced to include specific guidance of concurrent planning depending on the permanency goals and the individual child and family circumstances. The Permanency Planning Resource Guide is currently available on the DFPS public website.
d. Collaborate with the Texas Permanency Outcomes Project (federal grant) in its pilot work in three sites (Regions 02,0 6, and 11).	September 2021	DFPS remains committed to working with the Texas Permanency Outcomes Project which has the mission of refocusing practice, strengthening the workforce, and transforming how systems treat families and children within foster care.

**Objective 1.7: Facilitate reunification and permanency efforts (CFSR PIP Goal 5) – Rocky Hensarling**

**Rationale:** Reunification is the primary permanency goal in most cases when DFPS has conservatorship of a child. Through enhancing agency practice and services focused on safety, permanency, and well-being, the agency will achieve reunification timely while identifying and addressing barriers to reunification earlier in the case. When children and youth enter DFPS conservatorship, DFPS must immediately begin the process of planning for positive permanency. Positive permanency guides DFPS to seek an outcome in which the child exits DFPS care into a permanent setting with a legal relationship to a family. When a child is unable to return home safely, positive permanency underscores the need for DFPS

staff to seek another permanent family setting for the child. If DFPS is unable to achieve positive permanency for a child, then it is incumbent upon the agency to identify, develop, and support connections to caring adults who agree to provide support when the youth ages out of the foster care system.

**Expected Outcomes**

- Children and youth will have visitation with family and maintain connections to their community;
- Family reunification will be the priority permanency goal for children in DFPS temporary managing conservatorship unless aggravated circumstances exist, or reunification has been ruled out; and
- DFPS will safely reduce the number of children and youth in DFPS conservatorship by reducing the time to positive permanency.

**Outcome Measures**

- The number of safe and timely exits from DFPS temporary managing conservatorship to family reunification will increase;
- The number of children in DFPS permanent managing conservatorship who exit to family reunification will increase; and
- Length of time in care for children will decrease.

Interim Benchmark/Milestone	Target Completion
Develop statewide and regional strategies to improve permanency outcomes for children and youth in DFPS conservatorship.	Ongoing
Enhance the Family Group Decision-Making model to include more focus on safety and permanency, incorporating the single case plan model and collaborative family engagement.	Ongoing
Utilize expertise of the conservatorship program administrators to identify barriers, opportunities for improvement, and best practices.	Ongoing
Utilize Parent Collaboration Groups across the state to identify opportunities for improvement in practice and provide feedback on policy and services provision to parents.	Ongoing
Enhance fatherhood engagement.	Ongoing

**Summary**

In fiscal year 2022, the percent of children who emancipated from conservatorship decreased from 7.08 percent in fiscal year 2021 to 6.44 percent (DFPS Data Book: Children Exiting DFPS Legal Custody). Children entering DFPS permanent

managing conservatorship increased from 6,810 in fiscal year 2021 to 6,984 in fiscal year 2022 (DFPS Data Book: Legal Statuses Granted During Fiscal Year). There were 9,972 children in DFPS permanent managing conservatorship at the end of fiscal year 2022 (DFPS Data Book: Children in DFPS Legal Responsibility on August 31). DFPS was also able to increase the percentage of children who exited to reunification from 32.72 percent in fiscal year 2018 to 34.43 percent in fiscal year 2022.

To improve permanency outcomes for children and youth in DFPS conservatorship, DFPS continues to collaborate with parents and kinship caregivers through the statewide and regional parent and kinship collaboration groups and is focused on improving practices as it relates to engaging families and increasing visitation between siblings and parents. Kinship caregiver training was revised in 2020 to include enhanced information on the purpose of family visitation and the importance of supporting quality visitation and family relationships. The Parent Collaboration Group reviewed resource guides and policy to provide insight on ways to enhance caseworker practice to more effectively engage parents. DFPS provided engagement videos to staff in two key areas: working with kinship caregivers, developed through the Kinship Collaboration Group; and engaging fathers and the importance of the contributions of fathers in children’s lives over their life span.

The CPS Permanency division has continued to provide guidance to staff on working with kinship caregivers and engaging parents and families and expects these activities will support the outcome goals of reducing time in care and increasing exits from foster care to family reunification.

**Strategy 1.7a Lead: Paul Busby**

**Strategy 1.7a: Enhance understanding of the importance of visitation and that participation in more frequent and regular visitation with parents results in more positive outcomes for children and families.**

**Rationale:** The parent-child relationship is important to the well-being of children and parents. Consistent parental contact and visitation is strongly associated with more children being reunified with parents. More frequent and creative parent-child visitation results in earlier reunification. Research shows children who participate in more frequent visitation with parents exhibit improved well-being, including stronger attachments to parents, fewer behavioral issues, and better adjustment.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Provide information and training to staff to encourage more	September 2020 and ongoing thereafter	In January 2020, DFPS staff received information on providing bonding and connection activities for parents who are incarcerated so the parent-child bond is supported and encouraged. During COVID-19, DFPS disseminated information to staff on creative

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
creative and frequent visitation with parents and children.		"Virtual Visitation" using a variety of different video communication methods such as FaceTime, Zoom, and Google Duo. This allowed children, parents, and family members to stay connected during times when no in-person contact could occur. In-person contact has resumed.
b. Collaborate with kinship and parent collaboration groups to develop a collection of strategies to improve engagement and visitation between parents and children for use by direct delivery staff.	September 2021 and ongoing thereafter	Parent and kinship collaboration group meetings are held in-person again. Monthly Kinship Collaboration Group meetings are held virtually, quarterly in-person meetings have resumed as of April 2022. Parent-child visitation feedback will be obtained during these meetings and used for program, practice, and policy improvement.
c. Collaborate with the Children's Commission to develop and distribute information to legal stakeholders, such as courts, attorneys, and advocates for children and families on the importance of frequent and regular visitation for parents and children.	September 2021	The Children's Commission remains a vital partner in the Texas Permanency Outcomes Project which refocuses practice, strengthens the workforce and transforms how systems treat children and families within foster care. The Texas Permanency Outcomes Project operates three pilot child-placing agencies: 2INgage, Monarch, and Giocosa. Child Welfare Academy trainings started as of June 2022, and staff continues to learn their role in transforming foster care in Texas.
d. Expand Community-Based Care to five catchment areas across the state to increase close	September 2021	Region 08B is now in Stage II. Regions 03E, 04, and 05 are moving to Stage I, projected to begin Fall 2023. Stage I is starting in fiscal year 2024, after contracts execution in fiscal year 2023. There is also now an open procurement for other areas of the state not currently in Stage I or II.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
proximity to the child's home community, facilitating frequent and regular visitation.		

**Strategy 1.7b Lead: Paul Busby**

**Strategy 1.7b: Continue to enhance agency practice to encourage timely reunification of children with their families and address barriers in achieving reunification.**

**Rationale:** Reunification should always be the priority after removal of a child except in very rare circumstances, such as aggravated circumstances. Parent engagement and effective communication are critical to the success and timeliness of family reunification. The relationship between the caseworker and the family, visitation, and involvement of the substitute caregiver is important to successful reunification. Reunification efforts should start at the time of removal, and efforts should be made to address any barriers early in the case so reunification with the parents is not delayed.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Provide ongoing training and assess efforts toward achieving reunification through the use of the Family Reunification Tool.	September 2021 and ongoing thereafter	Due to other priority projects to address state litigation and federal requirements, DFPS still needs to work with DFPS Information Technology (IT) to create ways to pull data from the Family Reunification Tool.
b. Collaborate with Parent Collaboration Groups to help identify barriers in achieving reunification by collecting aggregate	September 2021	A virtual meeting was held on June 3, 2022, and two in-person meetings occurred on October 28-29, 2022, and June 23-24, 2023. A scheduled meeting planned for February 2023 was cancelled due to low parent liaison participation. Future in-person meetings are planned, but virtual meetings remain an option, based on group needs at the time.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
information from the parent perspective that can be shared with direct delivery staff and external stakeholders.		
c. Analyze aggregate information regarding initial goals selected within the first 90 days from the child's removal date that indicates the permanency goal(s) selected and identify best practices to share with regions to improve emphasis on reunification.	Ongoing	DFPS continues to share monthly on initial permanency goals and exits with state level data also broken down by region for region-specific discussion and analysis. Further analysis down to the case level occurs ad hoc when initial goals are another planned permanency living arrangement or unrelated adoption.
d. Develop strategies to help increase staff understanding of family engagement which can impact children exits to family reunification.	September 2021 and ongoing monthly	DFPS developed a Conservatorship Case Read Tool with a user guide and resources and implemented a soft launch in June 2021 for training and live webinar answer and question sessions. The Conservatorship Case Read Tool went live in September 2021. DFPS created a dashboard for the tool in January 2022 for regional leadership. As more data is collected, it will be analyzed and discussed with the regions on efforts to identify barriers and trends toward reunification will be conducted.

**Strategy 1.7c Lead: Paul Busby**

**Strategy 1.7c: Continue to enhance the Family Group Decision-Making model to include more focus on safety and permanency.**

**Rationale:** Utilizing the Family Group Decision-Making model provides a regular review of the identified safety threats which prevent children from being reunified with their parent. The model supports a family-centered practice to establish

permanency goals and evaluate progress toward identified goals. This process allows for adjustment in services to the parent, increases family engagement, and addresses any barriers to achieving permanency.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Conduct quarterly meetings with family group decision-making staff to strengthen facilitation skills, share data regarding trends statewide, and ensure fidelity to the model.	Ongoing	<p>Family group decision-making quarterly calls continue. CASA's collaborative family engagement coaches trained on blending collaborative family engagement elements into traditional meetings. These coaches are available to family group decision-making staff for ongoing consultation.</p> <p>Family group decision-making <i>Family Involvement Training</i> was held in-person in March and April 2023 for family group decision-making staff not yet trained on the curriculum. The next round of trainings will occur no earlier than Fall 2023 (early fiscal year 2024).</p>
b. Review and analyze family group decision-making data to identify trends, issues associated with capacity, and impact on permanency.	Ongoing	DFPS continues to collect and analyze family group decision-making data to share with family group decision-making staff and managers, as well as analytics staff.
c. Develop and provide specialized training to family group decision-making facilitators focused on improving the use of CANS assessments in service planning to best prioritize and individualize services.	September 2021	A webinar, developed in conjunction with the University of Kentucky and focused on how best to use the assessment for service planning was held on the CANS assessment.
d. Distribute a webinar containing materials and filmed excerpts of	September 2022	Due to the COVID-19 pandemic, this action step has not been fully achieved. A new computer-based training has been created and finalized to replace the outdated family group decision-making training previously available on the DFPS Learning Station. The

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
the family group decision-making facilitators training to direct delivery staff.		new training is available to all staff and is a requirement for all new CPI and CPS caseworkers.

**Objective 1.8: Increase permanent placements to kinship families when not reunifying (CSFR PIP Goal 5) – Rocky Hensarling**

**Rationale:** When children and youth are placed with kinship families, they are able to maintain a closer connection to their family and culture. Kinship care helps to increase placement stability and child well-being. Children experience better outcomes when they are placed with family members and can maintain connections to their communities. Kinship families often provide care for large sibling groups.

**Expected Outcomes**

- Texas will increase the placements of children with kinship caregivers and permanent exits to kinship families; and
- Children will remain connected to their families and communities.

**Outcome Measures**

- The number of children placed with kinship caregivers will increase;
- The number of kinship caregivers who become verified as foster parents will increase; and
- Exits to permanent managing conservatorship to relatives and adoption to relatives will increase.

Interim Benchmark/Milestone	Target Completion
Enhance safety, permanency, and well-being for children through the provision of direct services and support to their relative or kinship caregivers.	Ongoing
Improve early identification of potential kinship placement resources.	Ongoing

Interim Benchmark/Milestone	Target Completion
Continue to train staff about the kinship program to ensure timely referrals.	Ongoing
Continue using family team meetings and community collaborations to identify and engage potential kinship caregivers.	Ongoing
Publish a kinship quarterly newsletter.	Ongoing

### Summary

In fiscal year 2022, DFPS maintained a decreasing trend in the overall number of children who are being placed with relatives. The number of relative placements decreased from 23,358 in fiscal year 2020 to 18,262 in fiscal year 2022. However, this follows a trend in the overall population of children in conservatorship decreasing each year. Of those children placed in a kinship home in fiscal year 2022, a total of 3,289 children were placed in a kinship home as their first placement type after removal. Several regions achieved kinship placements as first placement at higher rates. Region 09 is leading the state in placing children in kinship care as the first placement with 62.8 percent of children in kinship placements upon removal. Region 07 had 52 percent of children placed in kinship care as a first placement. (Data Book: Child’s First Placement at the Time of Removal). Kinship specialists are working to identify placement practices in these areas so other regions across the state have the opportunity to learn from regions prioritizing placing children in kinship homes and as their first placement. Kinship remains the highest percentage of all placement types, indicating that overall relatives are sought out as a support and placement resource for children when first experiencing out-of-home placements.

In fiscal year 2022, out of 16,880 exits from DFPS conservatorship, a total of 7,308 exits were to relatives (Data Book: Exits from DFPS Legal Custody, Avg Months in Care & Average Placement). To improve the overall number of children in foster care placed with kin, as well as increase the exits to kin when a child cannot be reunified with their family, DFPS continues to work to identify and support kinship caregivers as they address the needs of children in their care. To achieve this, DFPS engaged in activities to increase staff knowledge of the benefits of kinship care and the various strategies available to support kin caregivers and increase positive permanency exits to a kin caregiver. A kinship placement training was developed and delivered to regional management staff, including program directors, program administrators, and regional directors to expand understanding of the importance of kinship placements. Additionally, DFPS has enhanced practice around the use of developmental plans with kinship caregivers and their use in addressing safety concerns in families. The statewide kinship collaboration group continues to meet virtually, both monthly and quarterly, to assist the CPS Permanency division in developing and enhancing the kinship program and identifying areas for improvement. During the COVID-19 pandemic,

statewide kinship collaboration group expanded its viability with the use of virtual groups. The professional development training for staff was enhanced to focus on kinship and relative placements, as well as the importance of relational permanency through previous kinship caregivers' experiences in a video format.

**Strategy 1.8a Lead: Anna McArtor**

**Strategy 1.8a: DFPS will continue to enhance safety, permanency, and well-being for children through the provision of direct services and support to their relative or kinship caregivers.**

**Rationale:** Children experience better outcomes when placed with family members or fictive kin. This allows them to maintain connections to their family, culture, and community. Expanding support to kinship caregivers allows for more children to be placed with family and remain with their siblings. Many kinship caregivers are below the 300 percent federal poverty level. Providing more support to kinship families will increase the likelihood of both short and long-term placement stability in kinship homes.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and implement a strategy to use kinship developmental plans more effectively to assess safety and support for kinship caregivers so more children can be placed in kinship homes.	September 2020 and ongoing thereafter	An updated Developmental Plan Tool was created to assist caseworkers in assessing the need for and creation of the plan, as well as monitoring the caregiver's progress in achieving the plan goals. The tool was previously introduced to regional leadership and now shared with field staff. A <i>Kinship Resource Guide</i> is being developed and will include the tool.
b. Review, strengthen, and implement training with DFPS staff and internal and external stakeholders on the importance of placing children with kinship caregivers.	September 2021 and ongoing thereafter	A mandatory <i>All-Staff Permanency Values</i> training was designed to educate staff about moving children to permanency through family engagement and the importance of building connections for children and youth in foster care.  The Kinship Collaboration Group developed, updated, and implemented a curriculum for the kinship training with the input of kinship advocates and caregivers whose formal kinship cases have closed. The kinship training is a requirement for kinship caregivers to qualify for the monthly reimbursement payment. Kinship development workers utilize the

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>kinship training to educate caregivers about the DFPS process and caring for the child, and provide resources designed to support kinship placements.</p> <p>Permanency Planning Meetings, such as family group and permanency conferences and Circles of Support, continue to be important tools used to identify and support kinship placements. Family group decision-making staff and kinship caseworkers utilize these meetings to ensure placing children with kinship caregivers is a priority.</p> <p>Kinship program specialists hold quarterly kinship scan calls with regional kinship leads, and participate in monthly program administrator meetings, providing guidance regarding the importance of inviting kinship staff to participate in these permanency planning meetings and discuss other kinship program updates.</p> <p>The Kinship Collaboration Group developed the <i>Kinship Video Series</i> which serves as a training tool for CPS staff regarding the kinship caregiver experience. It is designed to educate staff and external stakeholders about the value of kinship placements. This video series was added to the CPS professional development and individual training plans for new staff.</p> <p>The Kinship Collaboration Group developed a resource for kinship caregivers, called the “After the Call” Brochure, which aids in providing new kinship caregivers with updated information about the child’s school, medical, mental health, and many other resources specifically needed by these families at the time of placement. This resource is available for new kinship caregivers and can be provided by removal caseworkers and kinship staff. Also, the Kinship Collaboration Group is currently developing an “After the Case” brochure to assist kinship caregivers with post permanency needs for children in their care once the child’s case has been closed.</p> <p>The Kinship Collaboration Group created a series of flyers designed to inform caregivers about the verification process, as well as caregiver supports, such as the kinship Facebook page, the DFPS kinship caregiver webpage, and local kinship support groups,</p> <p>The Kinship Collaboration Group is also currently developing a series of PowerPoint presentations to a guide local kinship support group leaders in starting and facilitating these support groups.</p> <p>The Kinship Collaboration Group developed a <i>Kinship Values</i> staff training designed to train DFPS staff about kinship policy and best practices. This training includes input and</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>communication from previous kinship caregivers on important values to guide CPS staff when working with kinship caregivers. This training incorporates the <i>Kinship Video Series</i> released statewide in June 2021.</p> <p>A kinship home assessment training was developed for conservatorship program directors and regional leadership. Updates to the training were scheduled to coincide with the Kinship Conference in September 2021 but was delayed due to COVID-19. It is now in the planning stages for Fall 2023.</p> <p>Kinship specialists created a kinship quarterly newsletter to inform kinship caregivers across the state about resources and to highlight educational, early childhood intervention, and licensing and adoption topics.</p>
<p>c. Ensure each region has one or more active Kinship Collaboration Groups meeting at least quarterly to enhance knowledge of kinship caregivers' needs and concerns and to learn better ways to support kinship placements. Use assistance of statewide Kinship Collaboration Group to address barriers to development of regional groups, if needed.</p>	<p>September 2020 and ongoing thereafter</p>	<p>The statewide Kinship Collaboration Group was established in 2017 with quarterly in-person and monthly virtual meetings. The group consists of up to 11 DFPS regional kinship liaisons, 12 kinship advocates, and kinship caregivers whose DFPS cases have been closed. Current regional kinship caregivers are often invited to speak at these meetings to provide additional perspectives.</p> <p>Kinship Support Group meetings have been held throughout the state, providing support to more than 1,500 caregivers. Kinship specialists facilitate separate Kinship Collaboration Group meetings each month with DFPS, community-based care liaisons, and kinship caregiver advocates. In-person meetings resumed in April 2022. These meetings are utilized to share ideas and develop strategies for continuing to increase the support offered by regional support groups. During fiscal year 2023, regional Kinship Support Groups have continued to occur using both the virtual platform and, in a limited capacity, in-person. Kinship Support Groups are initiated locally, and the virtual meetings are shared statewide with continued efforts to grow the program.</p>
<p>d. Provide outreach to internal CPS staff and external stakeholders, to broaden their</p>	<p>September 2020 and ongoing thereafter</p>	<p>Kinship specialists continue to plan a kinship summit meeting for kinship staff and regional leads scheduled for Fall 2023. The objective is to bring together kinship staff from across the state. The conference topics and offerings will include updates to policy underscoring best practices and resources for kinship staff, as well as emphasize the great work from</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
knowledge of kinship resources.		<p>the kinship teams across the regions.</p> <p>Kinship program specialists created a Facebook page to highlight supports for Texas kinship caregivers, as well as stories about kinship news from around the state. This avenue provides the ability for the DFPS kinship program to connect with and provide resources to a wide variety of formal and informal kinship caregivers. The Texas Kinship Caregivers Facebook page currently has 2,446 followers.</p>

**Strategy 1.8b Lead: Anna McArtor**

**Strategy 1.8b: DFPS will continue to improve on early identification of potential kinship placement resources and make an ongoing effort to identify kinship families throughout the CPS case.**

**Rationale:** Kinship care should always be the first placement option explored if a child cannot remain safely in their own home. If a kinship placement is not available as a first placement option, kinship care options should continue to be explored throughout the life of the case. Placing children with kinship caregivers allows for children to maintain connections to extended family, siblings, and their communities. Children experience significantly less trauma when placed with someone they know.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Collaborate with the family group decision-making facilitator meeting by allowing time on the agenda to emphasize the importance of and strategies to increase identification of kinship placements and connections for	September 2020 and ongoing thereafter	<p>Family group decision-making staff were trained on the importance of concurrent planning which included helping family group staff facilitating discussions in meetings on efforts to engage kinship families while concurrently working toward Reunification. Family group decision-making staff participate in the collaborative family engagement training in connection with CASA to engage family and find family with an emphasis on including family and fictive kin voices. Kinship program specialists continue to revise policy and practice related to exploring and identifying kinship placements and connections for children during Permanency Planning Meetings.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
children.		
b. Develop and deploy information to educate direct delivery staff on the importance of placing children with kinship placements and strengthening family connections at the beginning of the case and throughout the case.	September 2020 and ongoing thereafter	The kinship training was updated with the input of kinship advocates and caregivers who's formal DFPS cases have been closed to assist staff in understanding and meeting the needs of kinship caregivers. This training is designed to encourage and support kinship placements. A <i>Kinship Video Series</i> was created by the Kinship Collaboration Group and is serving as a training tool for CPS staff regarding the kinship caregiver experience. The video series was completed and is currently being used to train new staff.
c. Develop and implement a kinship co-parenting training to help kinship caregivers and parents' co-parent when children are placed temporarily or permanently with kinship caregivers.	September 2022 and ongoing quarterly	The statewide Kinship Collaboration Group continues to develop a co-parenting model for kinship caregivers. This project is in development and will require long term project work, as there do not appear to be any widely available similar trainings produced by other states. Due to COVID-19, there were some temporary delays; however, the Kinship Collaboration Group has met with stakeholders and is moving forward with the project. This will continue to be addressed during future Kinship Collaboration Group quarterly meetings.
d. Monitor use of Permanency Care Assistance and retrain staff on strategies to increase verification of kinship caregivers with the emphasis on the Permanency Care Assistance resource when a child exits to permanent	September 2022 and ongoing monthly	Kinship specialists continue to work with DFPS IT specialists to develop new data warehouse reports designed to provide multiple levels of data which are useful in determining factors which may influence kinship placement rates and subsequent Permanency Care Assistance outcomes. Previous data reports have been implemented and are currently provided to regional staff monthly.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
conservatorship by the kinship caregiver.		

**Objective 1.9: Achieve permanency more quickly (CFSR PIP Goal 5) – Hector Ortiz**

**Rationale:** Adoption is the best choice for children and older youth in DFPS care when it is not safe for them to return home and the rights of the child’s birth parents are terminated. Adoption benefits children and older youth by giving the child a stable and permanent home, a sense of belonging and security, and lifelong support to grow and become a healthy, productive adult.

This objective seeks to eliminate barriers to timely permanency for Texas children in foster care through systems change efforts that center on adoption services and recruitment of adoptive homes. This includes state-level policy and practice enhancements, ongoing and new state-level initiatives and partnerships, and community-specific strategies. Because barriers to adoption and capacity are unique to a community, specific strategies in support of this objective must be identified and implemented at the local level. DFPS drives systems improvement through regional strategic planning and initiatives. Simultaneously, DFPS is transitioning to a community-based service delivery system with the implementation of Community-Based Care. A performance-based contract with SSCCs incentivizes increased permanency and decreased time in foster care.

**Expected Outcomes**

- More children will achieve positive permanency;
- The time to achieve positive permanency will decrease;
- The number of consummated adoptions will increase;
- Culture change with agency workforce, providers, and stakeholder partners;
- The time to submit and process an Interstate Compact on the Placement of Children (ICPC) home study request will decrease; and
- Number of ICPC home studies completed within required timeframes will increase.

## Outcome Measures

- Increase number of exits to positive permanency;
- Decrease length of time to positive permanency;
- Increase in number of consummated adoptions;
- Decrease in foster care days;
- Decrease times for submitting and processing outgoing ICPC home study requests; and
- Increase in number of incoming ICPC home studies received within required timeframe.

Interim Benchmark/Milestone	Target Completion
Build awareness of adoption with the public and stakeholders.	Ongoing
Promote adoption of target populations.	Ongoing
Evaluate and build upon current adoption and post-adoption services.	Ongoing
Use child specific recruitment efforts to identify adoptive homes for children who are waiting for adoption and are not yet in their permanent placement.	Ongoing
Develop policy and practice enhancements.	Ongoing
Utilize regional permanency plans focusing on region-specific barriers to permanency, including adoption, informed by local data and analysis.	Reviewed quarterly and updated annually
Develop foster care capacity building plans, including recruitment of foster-adopt homes, which is data-driven based on the DFPS annual foster care needs assessment.	Reviewed quarterly and updated annually
Implement of Community-Based Care for a total of five sites by 2020.	Dependent on legislative direction and resources
Monitor outgoing ICPC home study requests to ensure decisions are received within required timeframes.	Ongoing
Evaluate timeliness of submission and processing for outgoing ICPC home study requests.	Ongoing

## Summary

DFPS continues to make efforts for policy and practice enhancements through all stages of service to promote positive permanency. Permanency efforts include an emphasis on outcomes specific to adoption. Quarterly calls are occurring with regional adoption management to discuss barriers to adoption, policy changes, recommendations for program improvement, and successes at the regional level. Regions are encouraged to share successes or discuss solutions to barriers to permanency through adoption so other regions may learn from them. DFPS is taking a collaborative approach to ensuring outcome measures are met in increasing the number of adoptions and decreasing time to permanency.

Partnerships for training and adoption competency education include AdoptUSKids and the National Training Initiative with the goal of enhancing staff skills in working with children available for adoption and adoption best practices. DFPS entered into a service plan with AdoptUSKids which includes several goals with a focus on assistance with best practices for adoption recruitment, photo listing, and youth engagement including technical assistance and training. DFPS worked with National Training Initiative to integrate their adoption competency training with DFPS interface which is available to all staff. The National Training Initiative adoption competency training is federally-funded and evidence-based and includes courses for three different audiences – child welfare professionals, welfare supervisors, and mental health professionals. This will enhance adoption practices and knowledge across the state. The Texas Adoption Resource Exchange (TARE) continues to be one of the prominent recruitment methods for children, and DFPS tracks data monthly to ensure child profiles are kept current and inquiries are responded to in a timely manner. CPS is working closely with DFPS IT to assess the cost to enhance the TARE application and develop a process to resolve technical issues more quickly with the goal of improving user functionality for internal staff and adoptive families. With more adoption competencies knowledge, better profiles with youth engagement, and a more user-friendly TARE webpage, DFPS hopes to see a decrease in the number of days children are in foster care, while also increasing the number of children who exit care with a positive permanency outcome.

Texas was awarded a federal grant to assist with the implementation of the National Electronic Interstate Compact Enterprise (NEICE) system, an electronic interstate case processing system that will allow the electronic exchange of information required for interstate placements. On March 15, 2023, Texas went live and launched NEICE to improve permanency outcomes by:

- Providing states with secure, electronic means for exchanging ICPC case data;
- Shortening the length of time children and families wait for placements across state lines;
- Standardizing how each state processes an ICPC case by decreasing the time for submitting and processing incoming and outgoing ICPC home study requests;
- Providing states with a tracking mechanism on case progress; and
- Reducing the time it takes Texas ICPC to process ICPC documents to other states through Outlook.

Outcome Measure	FY 2021	FY 2022
Number of Exits to Positive Permanency	15,900	15,599
Length of Time to Adoption in Months	27.8	28.4
Number of Consummated Adoptions	4,627	4,483

Source: DFPS Data Book (Children Exiting DFPS Legal Custody Fiscal Year 2022)

**Strategy 1.9a Lead: Jennifer Vincent**

**Strategy 1.9a: Policy and practice enhancements.**

**Rationale:** By enhancing DFPS policies and practices, DFPS will be able to find barriers with timeliness to adoption and address them statewide. Through evaluating and enhancing practices, DFPS will increase adoption knowledge and competencies with staff and ultimately have children achieve permanency timelier. Action steps are associated with DFPS’s partnership with the Children’s Bureau’s Adoption Call to Action and are outlined in DFPS’s Adoption Call to Action Plan.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Continue targeted adoption recruitment events in the regions, including adoption match parties, television segments, and Heart Galleries.	Fall 2019 and ongoing thereafter	Targeted adoption recruitment events have returned to in-person. DFPS is still utilizing virtual recruitment such as virtual video match events, paper match events, and email broadcasts. As a result of the Adoption Call to Action, DFPS has partnered with community stakeholders to identify areas of the state with gaps in local recruitment events and work with community partners to implement Heart Galleries, Wendy’s Wonderful Kids, television segments, and other recruitment events.
b. Update the TARE webpage for easier searching and navigating of the page.	Initiated September 2022; target completion in FY2025	TARE webpage was most recently updated in January 2020, with minor enhancements. An IT project to completely overhaul the TARE application through an IT TARE redesign project should be complete by fiscal year 2025. Monthly progress meetings are held to ensure the contractor is meeting goals and deadlines and to review application updates.
c. Conduct quarterly calls with statewide regional adoption management teams to	September 2020 and ongoing thereafter	Quarterly calls began in May 2020 and have continued. The regional calls have shown to be productive and helpful.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
share successes and discuss barriers.		
d. Implement the PUSH (Placing Us in Safe Homes) Initiative.	Ongoing	PUSH has provided DFPS with valuable data on the barriers to adoption consummation for children who are placed in their intended-to-be permanent placements. PUSH has been reworked to monitor changes in permanency plans to include adoption, permanent managing conservatorship, and permanent managing conservatorship with permanency care assistance. PUSH will continue to be an ongoing project that will now run the course of the fiscal year. In addition to PUSH, DFPS has implemented a recruitment tracking system to evaluate recruitment efforts to bolster recruitment for children who are not in intended-to-be permanent placements.
<b>e. Develop a TARE Refresher training.</b>	Ongoing	<b>A virtual TARE Refresher training was held during the DFPS Adoption Conference in December 2020 in conjunction with AdoptUSKids as a part of the service plan. The TARE Refresher training was offered again statewide in October 2021. Additionally, upon request the TARE refresher has been offered to regions. One training was provided to Region 07 in September 2021, and also to an SSCC partner in March 2022 who requested another refresher training which occurred April 27, 2023.</b>
f. Partner with AdoptUSKids to build training on best practices for adoption recruitment, photo listing, and youth engagement.	September 2022	DFPS completed the service plan with AdoptUSKids in May 2022 which was updated and renewed in January 2023.
g. Provide customized training on adoption competencies for targeted populations.	September 2020	DFPS and partner organizations provided adoption competency training to DFPS adoption staff. The conference was held in December 2020. DFPS Adoption and Foster/Adopt Home Development staff are required to take the National Adoption Competency Training Initiative for Child Welfare Professionals training as of January 2021.
h. Create a Lifebook for staff to use statewide.	December 2023	DFPS worked to develop a new Lifebook for statewide use; however, in the research and development of the project, an electronic Lifebook was found and distributed to adoption staff statewide. Although copies of Lifebook options have been distributed statewide, a universal Lifebook is still desired. As such, this item is considered only partially complete.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
i. Develop National Training and Development Curriculum (NTDC) Pre-service Training for Foster and Adoptive Parents.	June 2023	DFPS has met with NTDC and other states to discuss their experiences and issues with the pilot program. DFPS attended the NTDC Train-the-Trainer in February 2022. The NTDC finalized curriculum became available to the public in June 2022, and DFPS began reviewing and developing curriculum. DFPS will roll out DFPS NTDC curriculum in June 2023.
j. Review and update Adoption Provider Enrollment (PEN).	September 2020	The adoption contract was executed in September 2020. All revisions are now included within the new open enrollment.
k. Implement TARE application enhancements.	Initiated September 2021; target completion in fiscal year 2025	CPS is moving forward with an IT TARE redesign project. DFPS IT is in the process of working to correct some identified existing defects to the TARE application. The IT TARE redesign project should be complete by fiscal year 2025. Monthly progress meetings are held to ensure the contractor is meeting goals and deadlines and to review application updates.
l. Participate in Adoption Call to Action state team planning meetings with the Children's Bureau and external stakeholders.	Ongoing	DFPS has participated in multiple state planning meetings hosted by the Children's Bureau to discuss DFPS's Adoption Call to Action plan and discuss initiatives, barriers, and successes with other state child welfare agencies. DFPS has participated in planning meetings with external stakeholders including the Children's Commission and other community partners to discuss action steps using a collaborative approach.
m. Monitor outgoing ICPC home study requests to ensure decisions are received within required timeframes.	Fall 2019 and ongoing thereafter	Data reports are reviewed monthly. DFPS State Office ICPC contacts receiving states' compact offices to address delinquent home studies not received within the required ICPC timeframes. Outgoing ICPC home study requests continue to be processed in a timely manner by DFPS State Office ICPC specialists.
n. Evaluate timeliness for processing outgoing ICPC home study requests, placement and closure	September 2021 and ongoing thereafter	DFPS State Office ICPC communicates with Texas field staff as needed to discuss delays in submitting home study requests, placement, and closure 100Bs and quarterly supervision reports. DFPS State Office ICPC provides technical assistance and training to regional ICPC coordinators, as needed, and conducts quarterly TEAMS meetings with regional ICPC coordinators to discuss and answer ICPC questions.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
100B's and quarterly supervision reports.		
o. Implement the NEICE system.	Launched March 2023	In December 2019, DFPS entered into an MOU with the American Public Human Services Association (APHSA) for the purposes of implementing NEICE. On March 15, 2023, the NEICE project was launched. DFPS and the NEICE IT project manager meet daily to ensure NEICE is working successfully. DFPS has an 11-month warranty to ensure all defects are assessed and fixed.

**Strategy 1.9b Lead: Jennifer Vincent**

**Strategy 1.9b: Build awareness of adoptions with public, contractors, and stakeholders.**

**Rationale:** By building the awareness of adoption with the public and stakeholders, DFPS will see an increase of available adoption-motivated homes, better resources for children who have experienced trauma, as well as building a community statewide to better serve youth in DFPS conservatorship and after in finding permanency. This will also promote a culture change around adoptions statewide with the agency workforce, providers, contractors, and stakeholder partners. Action steps are associated with DFPS's partnership with the Children's Bureau's Adoption Call to Action and are outlined in DFPS's Adoption Call to Action Plan.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Create and circulate new adoption recruitment materials to provide to the public to promote adoptions.	September 2019 and ongoing thereafter	New adoption recruitment campaign materials were created and circulated to regional staff. Campaign materials are utilized to promote adoption from foster care, specifically the adoption of older youth and children with special needs, in the community and at information meetings and adoption recruitment events. DFPS continues to create additional adoption recruitment campaign materials to promote adoption from foster care.
b. Work with Community-Based Care partners to ensure a successful transition to	September 2021	Community-Based Care partners are involved in Operation PUSH, the Recruitment Report, quarterly statewide adoption calls, and post adoption services. DFPS continues to involve Community-Based Care partners in all areas possible to ensure a successful transition.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
Community-Based Care in five catchment areas and continued growth in permanency through adoption.		
c. Ensure foster care capacity building plans address the recruitment of foster-adopt homes and is data-driven based on the DFPS annual foster care needs assessment.	Annually	Since August 2017, an annual statewide Foster Care Needs Assessment has been published. The fiscal year 2023 assessment is posted on the DFPS public website (published March 2023 and updated April 2023).
d. Work with community partners, such as AdoptUSKids, to strengthen adoption recruitment profiles by reviewing profiles, focusing on a strength-based description, and developing best practice tips for profile development.	October 2022 and ongoing thereafter	DFPS State Office TARE staff is reviewing a select few profiles each month for strength-based narratives and started sending out quarterly reports in conjunction to the monthly reports. TARE staff have created a TARE focus group which consists of TARE coordinators from each region and meets quarterly to discuss barriers and successes. This initiative started in fiscal year 2022 and is ongoing. Its outcomes are still being monitored to ensure best practice use for child profiles.

**Objective 1.10: Promote normalcy – Rocky Hensarling**

**Rationale:** To maximize child development and well-being, it is important for children to participate in extracurricular and social activities. The legal status of the child, specifically when in the custody of the state, should not interfere with a child experiencing normalcy. DFPS continues to work on creating a foster care system that allows children and youth in foster

care who cannot remain safely at home access to the same activities and experiences as children and youth who are not in foster care. Not only do these experiences increase child and youth well-being while in foster care, but potentially lead to permanency resources. These resources can be the start of a caring connection to an adult as they transition into adulthood or lead to positive permanency.

**Expected Outcomes**

- Improved child well-being, improved education outcomes, and increased connection to community and permanency resources;
- Increased awareness by staff on the impact and effects of normalcy for children in foster care; and
- Clarity on normalcy by residential providers and their understanding of the reasonable and prudent parent standard.

**Outcome Measures**

- Community collaborations will increase;
- Children will be more engaged in extracurricular and normalcy activities; and
- DFPS staff and residential providers will take annual normalcy trainings.

Interim Benchmark/Milestone	Target Completion
Enhance service planning for children and youth in DFPS conservatorship to support participation in age- and developmentally appropriate activities similar to activities children outside of foster care experience.	Ongoing
Continue to work with residential contract staff and private providers to support normalcy activities for children and youth in DFPS conservatorship.	Ongoing
Collaborate with youth leadership councils.	Ongoing
Develop tools and job aids for staff.	Ongoing

**Summary**

To achieve the outcomes of improved child well-being and education and increase connection to community, DFPS engaged in activities targeting frontline staff to develop knowledge of the strategies available to increase normalcy activities and positive relationships for children and youth in foster care. Staff continue to participate in normalcy training on an annual basis that is augmented and enhanced to encompass new avenues for maximizing participation in normalcy activities. The

CPS Permanency division is also working with residential treatment providers to increase collaboration in case planning to promote youth engagement in normalcy activities when they are placed in a residential setting. Collaborating with residential treatment providers facilitates the development of the youth and the placement resource agreements and structure for normalcy activities with the support of the DFPS caseworker and other professional team members. Integrating normalcy activities into the plan for the child or youth increases connections for the youth and supports enhanced knowledge of the prudent parent standard and the benefits of normalcy activities on child well-being.

**Strategy 1.10a Lead: Todd Serpico**

**Strategy 1.10a: Increase normalcy opportunities for children and youth.**

**Rationale:** Increasing normalcy opportunities will help to maximize child development and well-being which can lead to positive permanency or a successful transition to adulthood. Children and youth in foster care need the same normalcy experiences as their peers who are not in foster care.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and distribute a normalcy guide for judges, attorneys, and other populations who interact with children and youth in foster care through a coordinated advisory workgroup effort between the Children’s Commission, CASA, DFPS, and other community partners.	September 2022	CASA published the <i>Normalcy Matters</i> guide to the public Texas CASA website, and DFPS will add this content to a new normalcy webpage developed on the DFPS public website anticipated for Summer 2023.
b. Discuss and receive input about potential ways to increase normalcy opportunities	September 2020 and annually thereafter	A Teen Conference is planned for July 12-14, 2023; with the University of Texas at Austin. The Statewide Youth Leadership Council met June 6-8, 2022, October 22, 2022, February 26-27, 2023, and a meeting is planned for June 13-16, 2023.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
from the Statewide Youth Leadership Council and conference or event fishbowls to be shared with internal and external stakeholders.		
c. Residential contracts monitors to be trained in strategies to monitor normalcy opportunities through the Child's Plan of Service.	September 2020 and ongoing thereafter	Completed and the monitoring of normalcy opportunities is included in the reading guide.
d. Develop and implement a mandatory, annual webinar normalcy training for DFPS staff to ensure understanding and importance of ensuring children and youth have normalcy opportunities.	September 2020 and ongoing thereafter	DFPS updated the mandatory normalcy training on the DFPS Learning Station (new course number 0003808) <i>Normalcy for Children in Foster Care</i> . Normalcy training was added as a part of CPS professional development initial caseworker training and caseworkers are required to take the course annually thereafter.

**Strategy 1.10b Lead: Todd Serpico**

**Strategy 1.10b: Continue to enhance and strengthen service planning so it reflects tasks and goals related to participation in normalcy activities to meet each child or youth's individual needs.**

**Rationale:** Enhance and strengthen service planning so tasks and goals are identified to ensure youth are participating in normalcy activities. Normalcy activities are an important part of child development and well-being and help to prepare youth for positive permanency or a successful

transition to adulthood.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop protocol for and implement coordinated meetings between residential providers, parents, DFPS, children and youth, and other members of the child or youth's team.	September 2022	Regions 01 and 02 continue to use Single Child Plan meetings. Region 08B has been using the Single Case Plan meeting format and transitioned over to full Community-Based Care. Implementation of Single Case Plan meeting in legacy catchment areas was put on hold, since the Community-Based Care is rolling out in several more areas of the state, and the provider chooses the meeting model to use.
b. DFPS and residential childcare providers will have access to IMPACT to work on the same Child's Plan of Service without duplicative efforts.	Ongoing	This project is on hold.

**Objective 1.11: Support physical and behavioral health oversight (CFSR PIP Goal 6) – Jennifer Nichols**

**Rationale:** Children and youth in DFPS conservatorship enrolled in STAR Health are eligible for service coordination, and service management is available for children with more serious health and behavioral health needs. STAR Health also oversees and reviews psychotropic medications and provides an electronic Health Passport, member services, and nurse advice line. DFPS collaborates with HHSC which manages the contract with Superior HealthPlan to oversee the healthcare children are receiving through STAR Health.

**Expected Outcomes**

- Children will receive adequate services to meet their physical and behavioral health needs.

## Outcome Measures

- The percentage of children receiving adequate services to meet their physical health needs; and
- The percentage of children receiving adequate services to meet their mental and behavioral health needs.

Interim Benchmark/Milestone	Target Completion
Collaborate with HHSC, STAR Health, managed care contractors, residential providers, and staff to support appropriate medical services to children in DFPS care.	Ongoing
Continue efforts to strengthen policy, procedure, contracts, and training related to the provision of informed consent for psychotropic medications.	Ongoing
Collaborate with partners regarding monitoring the use of psychotropic medications, including the continuation of the Psychotropic Medication Monitoring Group chaired by the DFPS medical director.	Ongoing
Continue collaboration with HHSC and STAR Health for the psychotropic medication utilization reviews of children placed in Texas under the ICPC.	Ongoing
Provide training to staff and stakeholders on STAR Health, medical consent, psychotropic medications, 3 in 30 (Texas Health Steps, CANS, and 3-day medical exam), and the Health Passport.	Ongoing
Collaborate with HHSC and STAR Health to increase compliance with initial Texas Health Steps Medical Checkups, CANS, and the 3-day medical exam.	Ongoing
Facilitate the use of multi-disciplinary team “case meetings” to develop service and health care plans for children with complex health needs	Ongoing
Increase the awareness of the availability of STAR Health services under the Medicaid Former Foster Care Youth program and the Medicaid for Transitioning Foster Youth program for youth who are aging-out or who have aged-out of care.	Ongoing
Assist caregivers in navigating and managing the healthcare system effectively.	Ongoing
Collaborate with HHSC and STAR Health to increase the availability of STAR Health network providers certified and trained in trauma-informed, evidence-based therapy.	Ongoing

Interim Benchmark/Milestone	Target Completion
Collaborate with HHSC, STAR Health, managed care contractors, residential providers, and staff to support appropriate medical services to children in DFPS care.	Ongoing

### Summary

The CPS Behavioral Health Services division continues to support staff and caseworkers through ongoing support and training in the subjects relevant to substance use disorder, CANS, mental health, and trauma-informed care. The CANS 2.0 is now permanently available through telehealth when in-person assessment is not possible, though in-person assessment is preferred. Efforts to increase CPS Adult and Youth Mental Health First Aid trainers continue with plans to certify an additional two staff as trainers from the Behavioral Health Services division along with replacing the two trainers lost through attrition. This will bring the number of certified Youth Mental Health First Aid trainers to seven.

The CPS Medical Services division works to support DFPS direct delivery staff to ensure the medical needs of children in foster care are being met. The CPS Medical Services team regularly partners with HHSC, STAR Health, and the provider community. The CPS Medical Services division includes well-being and program specialists and nurse consultants. CPS has a medical director, who is a pediatrician with experience leading a Foster Care Center of Excellence and providing health care to children in DFPS conservatorship.

Children who enter into state custody receive a medical screening exam within three days after removal. As of September 2023, the eligibility for the 3-day medical exam is narrowed to circumstances when the child has been removed for physical or sexual abuse, has an obvious injury, has chronic or complex medical condition, or has a mental health diagnosis. The CANS assessment and Texas Health Steps developmentally appropriate medical checkups are required within the first 30 days.

DFPS continues to monitor the usage of psychotropic medication through collaboration between DFPS, HHSC, and the STAR Health. This review process aids in ensuring children in DFPS conservatorship are receiving appropriate psychotropic medications. The Psychotropic Medication Monitoring Group meets quarterly and consists of DFPS staff, HHSC Medicaid/CHIP staff, and the STAR Health provider medical professionals, pharmacists, and others. Statistical claims data is reviewed and requests for Psychotropic Medication Utilization Reviews are monitored. The Psychotropic Medication Utilization Parameters for Children and Youth, was last updated in June 2019 and currently under a routine review for the 7th Edition. The Parameters are best practice guidelines published under the purview of HHSC.

DFPS and STAR Health have supports in place to address healthcare needs for youth transitioning out of care. The DFPS Transitional Living Services program provides transition planning, services, and benefits to both older youth in foster care and those who have already become young adults. STAR Health transition specialists are available to assist members in preparing to manage their own healthcare. Collaboration between DFPS, STAR Health, and HHSC is planned to identify areas of risk where transitioning youth do not enroll or maintain enrollment in medical coverage when eligible, improve use of preventative care for transition age youth, and increase and maintain enrollment in healthcare coverage for youth and young adults who have transitioned out of care. Implementation of data requests/reviews and reviews of current youth training has been delayed due to the COVID-19 crisis and the continued Medicaid coverage due to this public health emergency.

Outcome/Item/Data Indicator	Standard	Q2-FY22	Q3-FY22	Q4-FY22	Q1-FY23
Item 17 Physical Health of the Child	90%	77.8%	76.7%	81.4%	72.9%
Item 18 Mental/Behavioral Health of the Child	90%	75.9%	75.4%	78.9%	76.6%

Source: DFPS quarterly CFSR reviews fiscal years 2022 and 2023

**Strategy 1.11a Lead: Brandi Young**

**Strategy 1.11a: Improve the use of the CANS assessment in service planning for youth.**

**Rationale:** The CANS assessment is a tool that helps decision-making, drives service planning, facilitates quality improvement, and allows for outcomes monitoring. DFPS uses the CANS to gather information about the strengths and needs of the child to plan for services that will help the child and family reach their goals. CANS is a comprehensive, trauma-informed, behavioral health assessment intended to promote communication within a child’s care team, prevent duplicate assessments by multiple parties, decrease unnecessary psychological testing, aid in identifying placement and treatment needs, and inform case planning decisions.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and produce a video training tool (webinar)	Completed May 2022	The <i>Individual Training Plan</i> training for newly hired DFPS field staff went live May 2022. The training focuses on how to understand the CANS assessment and implementing it into the Child’ Plan of Service. This training took the place of the current CLOE training.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>on the use of CANS and service planning for family group decision-making facilitators and direct delivery CPS staff. The training will highlight strategies to use CANS assessment tool results more effectively in-service plan development.</p>		
<p>b. In coordination with HHSC and STAR Health, DFPS will implement a statewide telehealth option for CANS assessments of older children and youth to increase CANS compliance rates when completion of a CANS assessment has proved challenging.</p>	<p>Completed March 2021</p>	<p>As of March 2021, HHSC, STAR Health, and DFPS implemented a statewide permanent telehealth option for the use of a CANS assessment for all children age 3 to 17 years old. Although in-person assessments are preferred, the telehealth option has provided increased availability.</p>
<p>c. Evaluate the use of the CANS telehealth options on compliance and satisfaction.</p>	<p>Completed October 2020</p>	<p>The telehealth pilot concluded on October 31, 2020.</p>
<p>d. Use collaboration between DFPS, HHSC, University of Kentucky contract, and</p>	<p>September 2020 and ongoing thereafter</p>	<p>DFPS gathers a data report biweekly from the eCANS system which identifies the children with a completed CANS assessment. As of October 2022, this information is located in the DFPS Data Warehouse. The eCANS data is then compared to data from the IMPACT of the children in DFPS care without a completed CANS assessment since</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
STAR Health to increase compliance with the CANS assessment, including improving quality of the tool and regular communication with field staff and service coordination with STAR Health.		coming into care and those who need an annual assessment. After cross-checking information from both systems, the report is then emailed to the CPS director of field and the director of community-based care for distribution to field staff alerting them of the need for an assessment. This report and its distribution to staff help ensure compliance in making sure each child receives appropriate services timely.

**Strategy 1.11b Lead: Jennifer Nichols**

**Strategy 1.11b: Support CPS staff in increasing access to services for youth and families involved with child welfare who have complex behavioral health needs.**

**Rationale:** The Texas Family Code, Section 261.001(9) defines a Serious Emotional Disturbance (SED) as a “mental, behavioral, or emotional disorder of sufficient duration to result in functional impairment that substantially interferes with or limits a person’s role or ability to function in family, school, or community activities.” Many children and youth in foster care have experienced significant or ongoing traumatic experiences with co-occurring behavioral health needs and meet criteria for serious emotional disturbance. Children and youth in foster care with high behavioral health needs require support and service coordination to ensure their needs are met.

The CPS Behavioral Health Services division includes a behavioral health services division administrator who oversees substance use disorder, CANS, trauma-informed care, and mental health positions. The division complements comparable staff within CPI. These staff are spread throughout the state and provide support, resources, and technical assistance to direct delivery staff in their work with families experiencing substance use disorders through every stage of service.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>a. Increase the capacity for delivery of Mental Health First Aid training with ten DFPS staff certified as Mental Health First Aid trainers.</p>	<p>September 2024</p>	<p>In fiscal year 2022, Youth Mental Health First Aid training is available on a monthly basis. There are currently five Youth Mental Health First Aid trainers within DFPS. Four additional trainers should be on board by September 2023. The training is very popular with direct delivery staff and often filled as soon as new training options are announced.</p>
<p>b. The Behavioral Health Services division will strengthen ongoing collaboration with external behavioral health system partners including HHSC, local mental and behavioral health authorities, Outreach, Screening, Assessment, and Referral (OSAR) centers, treatment facilities, crises centers, and other mental health and substance use disorder service providers and external stakeholders with implementation of a quarterly forum to share information and discuss mutual strategies to improving services.</p>	<p>June 2020 and quarterly thereafter</p>	<p>The Medical and Behavioral Health Services division participates in a monthly joint meeting with STAR Health and HHSC on collaborative measures to ensure operations are functioning efficiently. There is a monthly meeting with DFPS representatives, Texas Department of State Health Services leaders, and HHSC leadership to coordinate public behavioral Health services.</p> <p>A quarterly behavioral health and medical services stakeholder meeting continues. Representatives from DFPS State Office and field, HHSC Medicaid/CHIP division, Behavioral Health Services department, medical hospitals and advocates, behavioral health hospitals and advocates, and the Children’s Commission participate to share information on services and system coordination and identify any gaps in order to strengthen service delivery to children and families involved in child welfare.</p> <p>The DFPS Behavioral Health Services team members participate in a bimonthly meeting with HHSC’s Children’s Mental Health team to discuss and address concerns that impact prevention, early intervention, and recovery from mental illness. This workgroup regularly connects and exchanges resources to change the trajectory of Texas families who are at risk of experiencing a mental health crisis.</p> <p>The DFPS Behavioral Health Services CANS team participates in the University of Kentucky’s quarterly CANS in Child Welfare in the U.S. meeting. This solution-focused meeting allows the states that have implemented or are in the process of implementing the CANS assessment into their child welfare system to discuss current issues impacting them and -the advancements regarding the CANS assessment. This collaborative group works together to discuss solutions, share how the CANS assessment is used in their states, and discuss how the CANS assessment can assist with other aspects of behavioral and mental health services.</p> <p>The substance use program specialists participate in monthly and quarterly collaborative</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		meetings with CPI, HHSC, and statewide OSAR service agencies to strengthen and improve communication that ensures access to coordinated service delivery or other support services related to substance use treatment.
c. Behavioral Health Services division staff will provide regional and statewide trainings to staff annually in all regions, and statewide to increase awareness of mental health, types of mental health assessments, co-occurring disorders, substance use disorders, and provider resources for youth and families with complex mental health needs and/or substance use disorders.	Fall 2020 and ongoing thereafter	<p>The CPS Behavioral Health Services division continues to deliver regional trainings for mental health and substance use. For mental health, the division hosted a monthly Lunch and Learn series for DFPS and SSCC staff with CPS Medical Services and presented division overviews to SSCC's with quarterly follow up and statewide residential providers. Substance use trainings included drug testing basics, medication-assisted treatment, fentanyl awareness, OSAR, substance use basics, and Delta 8 Education.</p> <p>The CPS Medical Services and Behavioral Health Services divisions jointly developed a presentation for regional staff which reviews current services offered through STAR Health and local community resources of assistance to staff working with a child, youth, or family experiencing behavioral health or medical service needs. The CPS medical and behavioral health services staff started presenting this to field in March 2022, and delivery is ongoing.</p>
d. Develop in partnership with stakeholders, communicate, and distribute a Plan of Safe Care optional statewide template for birthing hospitals to use after birth of a substance- exposed or drug-addicted infant in	Completed and ongoing	An interagency workgroup finalized the work for improving Plans of Safe Care which were then implemented during the past year. The Plan of Safe Care is designed to improve services to families involved with DFPS due to substance use issues. An emphasis is placed on collaborative efforts to improve current Plans of Safe Care standards, ensure coordinated service delivery, and enhance communication between DFPS and agencies providing treatment, or other support services, related to substance use treatment. A Plan of Safe Care toolkit was produced.to assist with implementation.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
order to better share information between service providers, families, and DFPS.		

**Strategy 1.11c Lead: Casey Houghton**

**Strategy 1.11c: Collaborate with HHSC, STAR Health, managed care contractors, residential providers, SSCCs, and staff to support appropriate medical services to children in DFPS care.**

**Rationale:** Ongoing collaboration with partners is needed to ensure providers, partners, and staff are up to date on services, resources, policy, and system changes to support each child in obtaining appropriate medical services.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Provide training to staff and stakeholders on STAR Health, medical consent, psychotropic medications, 3-day medical exam, Texas Health Steps, trauma-informed care, and the Health Passport.	Ongoing	Online STAR Health, medical consent, 3-day medical exam, Texas Health Steps, psychotropic medication, trauma-informed care, and Health Passport trainings are all examples of relevant training available to DFPS staff through the CLOE e-learning site for DFPS employees. Online trainings available on the DFPS public website for medical consenters and stakeholders include training on medical consent, psychotropic medication, and trauma-informed care. Training for regional direct delivery staff was developed by CPS Medical Services about STAR Health, available services, and resources. Training is currently underway and will be delivered at least once in every region by August 2023. Updates to 3-day medical exams are occurring, and all removal staff will be trained via webinar before September 1, 2023.
b. Collaborate with HHSC and STAR Health to increase compliance with the 3 in 30 (3-day medical exam, Texas Health Steps medical checkups (EPSDT),	Ongoing	The CPS medical services staff in the regions provide training during unit and manager meetings with stakeholders and to CPS staff during CPS professional development training that includes information about the 3-day medical exam, Texas Health Steps, and the CANS Assessment. CPS medical services and caseworker staff provide 3 in 30 materials and brochures to caregivers, parents, other caseworkers, and stakeholders. The CPS residential child-care contract also requires provision of these brochures to contracted providers. STAR Health provides webinars to DFPS staff on various healthcare-related topics, including 3-in-30.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
and CANS.		
c. Facilitate the use of multi-disciplinary team case staffing to develop service and healthcare plans for children with complex health needs.	Ongoing	<p>CPS well-being specialists facilitate multidisciplinary case staffing specifically for children with primary medical needs. The multidisciplinary case staffing's are also used with other serious or complex health conditions or when needed for any child at regional request, including children preparing to change placements, move out-of-state or into adoption, or just to develop a plan to meet the child's specific healthcare needs. The multidisciplinary team includes STAR Health service managers, CASA, caseworkers, CPS subject matter experts, nurse consultants, medical providers, child-placing agencies, foster and relative caregivers, and attorney's ad litem.</p> <p>The CPS Medical Services division utilizes a <i>Primary Medical Needs Resource Guide</i> that includes resources to ensure multidisciplinary team case staffing for children with complex health needs. CPS medical services staff attends other child-specific staffing's where healthcare issues are discussed, including placement and other behavioral health staffing, Permanency Roundtable Meetings, Family Group and Team meetings, Circles of Support meetings for youth preparing to reach adulthood and exit the foster care system, Child Watch staffing for youth under DFPS supervision, and staffing held specifically through hospitals or with a medical team.</p>
d. Assist caregivers and SSCC staff in navigating and managing the healthcare system effectively.	Ongoing	<p>Training has been developed for SSCC staff provided by regional well-being specialists via webinars and in-person on topics such as STAR Health, medical consent, 3-day medical exam, Texas Health Steps, psychotropic medication, trauma-informed care, and the Health Passport. Online training on the DFPS public website for medical consenters and caregivers includes training on medical consent, psychotropic medication, and trauma-informed care. Well-being specialists request review of service coordination levels identified by STAR Health, as needed, and ensure caregivers receive complex case management, service coordination, or service management based on the needs of the foster youth. STAR Health has a member services hotline and after hours NurseWise medical advice line available 24/7 to medical consenters, members, and CPS caseworkers for assistance in accessing services and providers. Quarterly meetings are held with SSCC leadership to discuss medical and behavioral health information and system-wide changes.</p>
e. Ensure changes in STAR Health managed care plan related to	Summer 2023	<p>Messaging regarding contract award of the new STAR Health contract was provided to DFPS and SSCC leadership. The new contract begins September 1, 2023. Contract changes have been announced and training provided to CPS Medical Services and DFPS</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>new procurement are shared with staff, providers, and partners, and ensure changes do not adversely affect the physical and behavioral healthcare of children.</p>		<p>leadership. Messaging to front line caseworkers, SSCC staff, stakeholders, and interested parties is being developed and will be broadcast before new contract begins.</p>
<p>f. Advocate for access to healthcare services for children by assisting staff and caregivers as needed.</p>	<p>Ongoing</p>	<p>Regional medical services staff provide training targeted at access to services and navigation of the STAR Health system to CPS staff. Trainings are provided in regional unit meetings, kinship development worker units, and to stakeholders, such as foster parents and case managers for child-placing agencies. Staff regularly provide one-on-one information and assistance to caregivers while attending child-specific staffing's and by phone. Staff regularly assist foster and relative or kinship caregivers with questions and provide guidance for accessing services and escalating healthcare issues as appropriate. STAR Health clinical trainers provide trainings for various healthcare topics including navigation of the STAR Health system for DFPS-contracted child-placing agencies and other residential operations. STAR Health has a member services hotline and after hours NurseWise medical advice line available 24/7 to medical consenters, members, and CPS caseworkers for assistance in accessing services and providers.</p>

**Strategy 1.11d Lead: Casey Houghton**

**Strategy 1.11d: Collaborate regarding monitoring of utilization of psychotropic medications.**

**Rationale:** Ongoing collaboration with partners is needed to ensure the appropriate use of psychotropic medications by children in DFPS conservatorship, improve oversight and monitoring, and improve the way children are assessed when they enter foster care.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Continue efforts to strengthen policy, procedures, contracts, and training related to the provision of informed consent for psychotropic medications.	Ongoing	CPS policies, practices, and procedures continue, including training on informed consent of psychotropic medication implemented to improve the provision of psychotropic medications. These are revised as needed.
b. Continue the Psychotropic Medication Monitoring Group chaired by the DFPS Medical Director.	Ongoing	CPS has quarterly virtual meetings with the DFPS Psychotropic Medication Monitoring Group.
c. Continue collaboration with HHSC and STAR Health for the Psychotropic Medication Utilization Reviews of children placed in Texas under the ICPC.	Ongoing	DFPS continues collaboration with HHSC for Psychotropic Medication Utilization Reviews for children in ICPC placements. The Medicaid Vendor Drug Program was added to the collaboration between DFPS and HHSC for Psychotropic Medication Utilization Reviews for children in ICPC placements. DFPS sends reports to the Medicaid Vendor Drug Program to review medication regimens and identify those outside the Texas Parameters. Letters are sent to those providers to identify regimens outside the Parameters. Copies of the letters are sent to corresponding child welfare entities of the states that placed the children in Texas. DFPS regional nurses also perform reviews of medication for children excluded from STAR Health upon request.

**Strategy 1.11e Lead: Casey Houghton**

**Strategy 1.11e: Support youth transitioning out of care to successfully access medical services.**

**Rationale:** Collaboration is needed to identify areas of risk where transitioning youth do not enroll or maintain enrollment in medical coverage when eligible, improve use of preventative care for transition age youth, and increase and maintain enrollment in healthcare coverage for youth and young adults who have transitioned out of care.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Collaborate with HHSC and STAR Health to identify areas of risk for healthcare enrollment and use of preventative care services for transition age youth.	Winter 2024	Continuous Medicaid coverage following the public health emergency from COVID-19 ended on March 31, 2023. HHSC will notify any youth who maintained coverage after transition to adulthood of their options to continue coverage by end of 2024.
b. Collaborate with HHSC and STAR Health to improve use of available preventative healthcare by transitioning youth, including maintenance of healthcare coverage.	Ongoing	During transition meetings for youth aging-out of care, DFPS staff will discuss healthcare coverage options for youth aged 18 to 20 years old. Youth enrollment automatically continues STAR Health unless they opt out. HHSC will provide health care coverage for transitioning youth until their 21st birthday.
c. Review current training for transitioning youth regarding their healthcare.	Summer 2023	Training for regional direct delivery staff was developed by CPS Medical Services about STAR Health, available services, and resources. Training is currently underway and will be delivered at least once in every region by August 2023.
d. Recommend and implement changes to training for transitioning youth regarding their healthcare	Ongoing	STAR Health asks screening questions during calls with transitioning youth to ensure medication management is discussed. STAR Health now has service coordinators link youth and caregivers with healthcare providers.

## Objective 1.12: Improve education outcomes – Rocky Hensarling

**Rationale:** Education is a key component contributing to a child's overall social and emotional well-being. Nationally, children in foster care often have poor educational outcomes due to a number of factors, including prior instances of family neglect and abuse, substance use, and family instability resulting in education disruptions. The 2020-24 goals are to maintain and strengthen education stability and improve the education outcomes for children and youth in DFPS conservatorship by collaborating with multiple agencies and community stakeholders to remove barriers from practices and policies, which hamper educational success.

### Expected Outcomes

- Children and youth in DFPS conservatorship will improve education outcomes by reducing school placement moves and education disruptions; and
- DFPS staff will continue its strong collaborative ties with TEA, the Children's Commission, CASA, Disability Rights Texas, University of Texas at Austin, and community groups by participating in ongoing community consortiums, stakeholder workgroups, presentations, and seminars.

### Outcome Measures

- Average number of child placement and school moves;
  - Monthly reports from regional education specialists on education-related activities to internal and external stakeholders and responses to child-specific issues;
  - Monthly status of education portfolio for children in conservatorship;
  - Pre-Kindergarten enrollment;
- Number of high school seniors and graduation rates; and  
Average number of tutoring referral and academic grade improvements.

Interim Benchmark/Milestone	Target Completion
Provide training through presentations by regional education specialists to internal and external stakeholders on identifying and resolving critical issues which serve as barriers to meet the educational needs and goals of children in foster care.	Ongoing
Provide monthly <i>Education Matters Newsletters</i> for internal and external stakeholders on education related issues, policies, best practices and concerns.	Ongoing

Interim Benchmark/Milestone	Target Completion
Establish and maintain a minimum of two community consortia in every region.	Ongoing
Engage external stakeholders, including agencies, school districts and support entities providers, caregivers, and community groups in collaborative efforts to address and improve education outcomes for students in foster care.	Ongoing
Establish current education portfolio which reflects the required documentation to support education decisions and student success for 100 percent of the school-age children and youth in DFPS conservatorship.	Ongoing
Reduce the number of different schools moves for children in foster care during the school year below established baseline of 3.2 moves.	Ongoing
Establish and maintain an academic tutoring referral process with community resources.	Ongoing

### Summary

To improve the education outcomes for children in conservatorship, DFPS has continued to partner with the Children’s Commission, the judiciary, the provider community, and educational partners. Through this collaboration, work has been done to educate those involved in serving children in foster care around topics of reducing school moves through keeping children in their school of origin, identifying, and providing services to meet the educational needs of the child through accommodations and special education, and focusing on increased post-secondary opportunities for youth in foster care. Through a collaboration with the TEA, the Children’s Commission, and school staff including child welfare liaisons, DFPS has completed and shared updates to the *Foster Care and Student Success Guide* published by TEA. This guide provides high-level overviews, many comprehensive targeted information sections, and additional resources for schools, administrators, and educators about students involved in child welfare. Additionally, DFPS has worked with partners at HHSC to increase referrals for early identification and assessments through Early Childhood Interventions.

### **Strategy 1.12a Lead: Felicia Penn**

**Strategy 1.12a: Continue to build, coordinate, and maintain collaborations among internal and external stakeholders who are invested in providing education initiatives and support for children and youth in conservatorship. DFPS will continue to coordinate with Children's Commission, TEA, and other stakeholders to implement education initiatives, which facilitate services to meet the educational needs**

**and goals of children and youth in foster care.**

**Rationale:** Building strong and successful collaborations with internal and external stakeholders will develop and secure significant education-related supports for children and youth in conservatorship. Collaboration will help secure better outcomes and identify issues to successfully address the educational needs of children and youth in foster care.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>a. Regional education specialists will provide ongoing trainings, support, and guidance to internal and/or external stakeholders monthly in each region, including DFPS staff, to address educational issues and concerns regarding children and youth in foster care.</p>	<p>Ongoing</p>	<p>Regional education specialists provided internal staff trainings through unit meetings in the regions, one-on-one tutorials with staff, and ongoing communication with staff. Training sessions are being held virtually and in person. Regional education specialists have provided technical assistance virtually and in person to caseworks, attorneys, foster care champions, school counselors, foster care liaisons, CASA, and caregivers to help navigate the education system. Regional education specialists provide trainings to the residential provider community and the local school districts on a regular basis and staffed more than 821 foster care cases with internal stakeholders. Education specialists provide regional newsletters and flyers to each region monthly.</p> <p>DFPS continues to maintain ongoing collaborations with the Children’s Commission, TEA, Disability Rights of Texas, education service centers, Early Childhood Intervention, independent school districts, Texas Association of School Boards, CASA, and the Foster Parent Association. These collaborations have resulted in more than 51 national, statewide, and regional presentations regarding Improving educational outcomes for students in foster care.</p>
<p>b. Regional education specialists will engage and collaborate with regional external stakeholders to help identify opportunities to improve educational outcomes for children and youth in foster care.</p>	<p>Ongoing</p>	<p>Regional education specialists work with their local education service centers and school districts. Individual work on behalf of a specific child is done through participating in more than 860 Admission, Referral, and Dismissal (ARD) meetings for children receiving special education services and more than 45 enrollment conferences both in-person and virtually.</p> <p>Regional education specialists worked with the Children’s Commission and TEA to educate and train on the updates of the <i>Foster Care Student Success and Every Student Succeeds Act Guide</i>. The regional education specialist provided more than 380 pre-kindergarten verification letters to caregivers enrolling children into programs. The regional education specialist has collaborated with community resources to provide academic tutoring support for foster youth. Annually, education specialists participated in Education Reach for Texans and Texas Workforce Commission conferences. Through the use of regional education consortiums held in each region at least once per quarter,</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		regional education specialists engage the larger community in discussing how to improve the outcomes for children in foster care. Regional education specialist collaborated with psychiatric hospital regarding educational needs of the 256 foster students being admitted into the hospital.
c. Education specialists will continue to participate in community-based consortia created to help identify and address educational issues for children and youth in foster care.	Fall 2023 and Ongoing thereafter	Each region led or collaborated with the educational service center to hold at least one consortium per quarter. The consortiums are held virtually and in-person allowing more engagement with homeless coordinators, directors of special education programs, judges, attorneys, and foster care champions. Education specialists have held 36 consortiums.

**Strategy 1.12b Lead: Felicia Penn**

**Strategy 1.12b: Continue to improve the overall education placement stability for children and youth in foster care and ensure all education records follow a child or youth if a placement or school change occurs. Continue to ensure children in care receive all the educational and ancillary services to meet their educational needs and goals.**

**Rationale:** Continuing to ensure student education stability will result in fewer children being retained at grade level, more children promoted to the next grade level, and fewer students unable to receive course credit resulting in higher school completion rate for students in foster care. The student's education portfolio is a key ingredient in meeting the child's educational needs and goals. Adults playing a significant role in ensuring the child's academic success use the education portfolio to access school-related documentation, including student assessments, report cards, school transcripts, transition plans, personal graduation plans, identified special education and ancillary services, and designation of the education decision-maker and surrogate parent.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>a. Collaborate with child welfare stakeholders and schools to maintain students in their school of origin and reduce the number of schools moves for children and youth in foster care.</p>	<p>Ongoing</p>	<p>DFPS instituted a performance measure in the community-based care contracts in an effort to increase children remaining in their school of origin. DFPS collaborated with TEA and the Children’s Commission to develop and provide additional information to DFPS staff, as well as schools on the requirements of Every Student Succeeds Act (ESSA). Regional education specialists participated in the Foster Care and Residential Treatment Center workgroup and ESSA workgroup. Regional education specialists work with school districts and TEA on the data capacity to track school changes for children and youth in foster care. Regional education specialists track and monitor high school junior and senior students in foster care who may be at risk of not completing graduation requirements due to frequent moves.</p>
<p>b. Monitor and review Education Portfolios to ensure 100 percent of school aged children in foster care have an education portfolio that reflects the required documentation to support their educational needs</p>	<p>Fall 2022 and annually thereafter</p>	<p>Regional education specialists are providing ongoing support to staff through unit meeting and educating staff on the importance of maintaining the Portfolio. Regional education specialists currently work with regional program directors and Child Care Licensing to monitor the distribution and use of Educational Portfolios. Regional education specialists remind regions to provide and maintain portfolios on a monthly basis. To reinforce the use of the Education Portfolio, DFPS worked with the judiciary to stress the importance of asking about education and the contents of the Education Portfolio at permanency review hearings. Regional education specialists will encourage caseworkers to review the contents of the portfolios monthly during placement visits.</p>
<p>c. Implement and participate in no fewer than three cross-training opportunities in each region with other agencies, schools, and community organizations to address educational needs and improve better education outcomes for children and youth in foster</p>	<p>September 2022 and ongoing thereafter</p>	<p>Regional education specialists performed or participated in cross-trainings with SSCCs, CASA, education service centers, the provider community, and the Children’s Commission. Education specialists provided more than 24 additional trainings on enrollment and records transfers to school district foster care liaisons and appointed college staff who facilitated enrollment and provided additional support to former foster students.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
care.		
d. Implement Community-Based Care in a total of five catchment areas in order to improve local placement and the ability for children to remain in their school of origin prior to removal.	September 2022	The requirement for maintaining a child in their school of origin is a performance measure for all Community-Based Care contracts. Education specialists meet monthly to create plans to improve educational outcomes within the Community-Based Care catchment areas. Regional education specialists provide daily support to Community-Based Care staff.

**Objective 1.13: Strengthen parental engagement (CFSR PIP Goal 4) – Rocky Hensarling**

**Rationale:** Engaging and working with parents is critical to maintaining safety, achieving positive permanency, helping the child maintain connections, and promoting child and family well-being.

**Expected Outcomes**

- Staff will have an enhanced understanding of the importance of parental engagement;
- Parent engagement, particularly with fathers, will increase;
- Staff will have a better understanding of working with parents who are incarcerated; and
- Increased collaboration with external stakeholders on how to improve engagement practices.

**Outcome Measures**

- Increase visitation between parents and children;
- Increased engagement and collaboration between CPS and the parent;
- Family strength and needs assessments are utilized in developing plans of service; and
- Increase identification of fathers.

Interim Benchmark/Milestone	Target Completion
Revamp expectations for working with absent and incarcerated parents.	Ongoing
Implement the Volunteer Expansion program that will train volunteers to assist biological parents with transportation to visits and appointments.	Ongoing
Implement a network of local providers designed to meet the specific needs of families in the Community-Based Care catchment areas, such as the Quality Parent Initiative in Region 03B Catchment Area.	Ongoing
Improve casework with families whose fathers are reconnecting with children after an incarceration.	Ongoing
Complete a video series for regional staff statewide to provide more practice guidance on how best to engage and support the parent victim of family violence, the children as well as the parent using violence, implementing a change process to increase safety and well-being for all family members.	Ongoing
Continue to raise awareness and improve practices regarding the importance of family engagement with staff and child and parent representatives who have direct contact with the parents and children served by the agency.	Ongoing

## Summary

To enhance staff understanding of the importance of family engagement and increase parent engagement, DFPS engaged in activities to address challenges and barriers to family engagement. DFPS works with the kinship and the parent collaboration groups to develop guidance for staff working with parents. DFPS produced several videos on family engagement and specific videos on the importance of fathers. Additionally, a resource guide was updated to provide current information on working with parents who are incarcerated or being released from incarceration and adjusting to life after incarceration. The CPS fatherhood specialist participates in community engagement activities throughout Texas and facilitates staff developing strategies for engaging families and addressing barriers to engagement. DFPS also provides ongoing training and guidance for staff working with families in cases where domestic violence is present and works to develop staff knowledge of strategies to engage both the victim parent and the person using violence in case planning. To further increase family safety, DFPS released a new open enrollment for Battering Intervention and Prevention Programs (BIPP) to contract directly with DFPS and expand the network of BIPPs available to families across the state.

### **Strategy 1.13a Lead: Kenneth Thompson**

**Strategy 1.13a: Continue to enhance understanding and awareness of the importance of engaging fathers to improve outcomes for children.**

**Rationale:** Fathers have an important role in their children’s lives and engagement of fathers can help improve positive outcomes for children in foster care. Children with involved fathers have a higher likelihood of leaving foster care more quickly. Engaging fathers and the paternal extended family provide increased options for positive permanency for children. Engaging fathers to be part of the solution to address concerns and issues empowers fathers to be engaged and more active and involved in their children’s lives.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Create initial videos and information to staff and internal and external stakeholders that will improve engagement with fathers.	September 2024 and annually thereafter	The initial father’s legacies videos are complete, and post on the Fathers Matter webpage. The recent changes in the state to add SSCCs as key players in the delivery of services will require additional consultation around support for fathers. Additional fatherhood engagement videos and webinar are planned, but were delayed due to COVID-19. Meetings with fathers will be ongoing to conduct additional fatherhood interviews and produce videos on ways for staff to enhance their engagement with fathers. The video series or webinars will feature conversation and tools addressing domestic violence, trauma, and a father’s value to his children.
b. Facilitate at least one meeting in each region with internal and external stakeholders to discuss policy and barriers to engaging fathers.	September 2024 and annually thereafter	Due to COVID-19, less meetings were held in 2020 and 2022. The fatherhood specialist incorporated both virtual and in-person meetings in 2022 through 2023. Stakeholder presentations were conducted in person with CASA, Anthem Strong Families, and the DePelchin Children Centers, the fatherhood specialist presented to unit meetings in Houston, Dallas, and Fort Worth discussing a father’s role in permanency. The fatherhood specialist visited two state prison sites, Travis County State Jail, and Gatesville Women’s Facility to deliver a message of hope and optimism when it comes to value as parents. The fatherhood specialist is coordinating efforts and opportunities with the community-based care stakeholders, CASA, and faith and community Initiative staff to establish a schedule to visit each region with the intent in bring more community members to the conversation.
c. Cultivate resources for internal and external stakeholder use that are father-friendly and collected for availability on a fatherhood internet	September 2024	Work to redesign the Fathers Matter website and add content is underway. The website provides staff and external stakeholders access to printable posters with father-friendly messages and images, as well as offers tip sheets, and other father-friendly and supportive materials to enhance or guide conversation with or about fathers. Additional information will continue to be added on an ongoing basis to the website.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
webpage.		
d. Provide information to DFPS staff on how to work with families whose fathers are incarcerated or reconnecting with children after an incarceration.	Ongoing	The fatherhood specialist is a member of the Legal Representation Workgroup sponsored by the Children’s Commission. The group contributed to the “Father’s Rights in CPS Cases” brochure and a poster for the incarcerated population. The fatherhood specialist acts as the liaison between the CPS and the Texas Department of Criminal Justice helping the facilitate a MOU between the two agencies.

**Strategy 1.13b Lead: Paul Busby**

**Strategy 1.13b: Continue to raise awareness and improve practices regarding the importance of family engagement with staff.**

**Rationale:** Engaging parents is critical for achieving successful outcomes for children in substitute care. Recognizing parents as the experts on their family and circumstances empowers them through the process and helps them make important decisions that affect their children and family. Engaging parents to gather and assess information helps identify what works well for the family and the family’s strengths and needs which can result in positive outcomes for children and parents.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Create three videos and information for direct delivery staff to improve practices regarding parent engagement.	September 2021	Three engagement videos were created and are now available to staff. The fatherhood specialist meets virtually and in-person with staff and stakeholders regularly to educate, discuss, and train on engagement with fathers.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>b. Ensure each region has at least one Parent Collaboration Group actively meeting to obtain feedback and input from parent representatives on parent engagement and utilize the input of the statewide Parent Collaboration Group to develop strategies to help regions when the regional group experiences barriers.</p>	<p>September 2021 and ongoing thereafter</p>	<p>There are Parent Collaboration Groups in all regions with an identified parent group leader. A statewide Parent Collaboration Group is currently active which allows parents from all over Texas to meet to share experiences and feedback. Parent Collaboration Group meetings have resumed in-person, but virtual meetings remain an option, based on the needs of the group.</p>
<p>c. Provide regional staff statewide guidance through development, distribution, and posting of Domestic Violence Initiative trainings on how to best engage and support the parent victim of family violence.</p>	<p>December 2020</p>	<p>This action step has been completed.</p>
<p>d. Recruit 10 percent more volunteers through the Volunteer Expansion Initiative to assist biological parents with</p>	<p>September 2021</p>	<p>There have been concerns regarding the safety of the volunteers and liability for insurance. DFPS does not carry primary insurance coverage for workers or volunteers who transport clients, but rather maintained by the person. Due to these concerns and ongoing COVID barriers, faith-based and community partners continue to offer resources to help cover transportation costs for biological parents, such as bus passes and cab fares.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
transportation to visits and appointments to help parents be engaged in services.		

**Strategy 1.13c Lead: Deshaun Faloms**

**Strategy 1.13c: Continue to utilize the Parent Collaboration Groups across the state to identify opportunities for improvement in practice and to provide feedback on policy and services provision to parents.**

**Rationale:** Involving Parent Collaboration Groups to provide input about engaging parents provides a unique and critically important perspective on how to improve policy and services to parents. The parent’s voice is important when making decisions that affect children and families. Feedback from the Parent Collaboration Groups allows DFPS to ensure the parent voice and lived experiences are incorporated into policy and practice to better serve families whose children are in substitute care.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop training content for staff that strengthen parental engagement based on input from the statewide Parent Collaboration Group.	December 2021	CPS continues to receive input from the Parent Collaboration Group to improve training for staff. Revisions to the statewide Parent Collaboration Group video for new employees are underway with a video shoot scheduled for June 23, 2023, the next statewide Parent Collaboration Group Advisory Committee Meeting. CLOE has training topics to meet the survey needs and revisions are planned for August 2023.
b. Develop and distribute an engagement newsletter to share information and resources.	Ongoing	A parent liaisons newsletter annually in the Fall regarding information on DFPS and state resources.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
c. Survey annually regional and statewide Parent Collaboration Groups on family engagement topics and distribute findings to internal and external stakeholders to highlight importance of the parental voice.	September 2020 and annually thereafter	A survey was completed in 2020 by parents with open CPS cases attending a parent support group. There is no projected date for the next one.
d. Collaborate and participate in community events or social media opportunities on a quarterly basis to raise visibility of parental voice or learn from other professionals working with parents.	September 2020 and quarterly thereafter	The Parent Collaboration Group representatives presented at the 2022 Texas Foster Care Conference June 25, 2022; Peer Services Presentation (Casey); and the consulted on the Capacity Building Center for States Presentation (Casey). The Parent Collaboration Group representatives participated at the Together for Families Conference October 19-21, 2022, and the 2022 Child Judges Conference on October 24, 2022.
e. Increase community presentations to highlight importance of parental voice.	Ongoing	CPS staff presented at the Texas Foster Care Conference in Summer 2022.

**Objective 1.14: Better meet the needs of children and youth within their communities – Hollie Mims**

**Rationale:** DFPS must establish effective practices for assessing the comprehensive needs of children, youth, and families to create a child welfare service delivery system that is responsive to these needs and can affect positive client outcomes.

DFPS is implementing Community-Based Care to promote community ownership, flexibility, and innovation in providing residential and child protective services that meet the unique needs of local children and families.

### **Expected Outcomes**

- Children and youth are safe from abuse and neglect;
- Placements in home communities will increase;
- Children and youth are appropriately served in the least restrictive environment;
- Stability in placements will increase;
- Connections to family and others important to the child are maintained;
- Children and youth are placed with siblings;
- Services respect the child's culture;
- Children and youth are provided opportunities, experiences, and activities similar to those experienced by their peers who are not in foster care;
- Children and youth are provided opportunities to participate in decisions that impact their lives;
- Reunification with biological parents, when possible, will increase (CFSR PIP Goal 5); and
- Increase placement with relative or kinship caregivers if reunification is not possible (CFSR PIP Goal 5).

### **Outcome Measures**

- Percentage of children and youth safe from abuse and neglect while in care;
- Percentage of children placed in foster care within 50 miles of their home at removal;
- Percentage of sibling groups placed together in foster care;
- Average of foster care placements per child;
- Percentage of care days in least restrictive placement settings;
- Percentage of service plans with child participation;
- Percentage of court hearings attended by children not excused from attendance;
- Percentage of youth turning 18 who complete Preparation for Adult Living life skill services;
- Percentage of youth age 16 and older with a driver's license or state identification card;
- Percentage of children placed with relatives; and
- Caseworker turnover.

Interim Benchmark/Milestone	Target Completion
DFPS will continue to implement Community-Based Care, Stage I in Region 02 and catchment area 08a. Upon successful contract negotiations, DFPS will initiate Stage I Start-Up and implementation in Region 01 and catchment area 08b.	Completed
DFPS will implement Community-Based Care Stage II, to include case management and services to families, in Region 20 and 03b catchment area.	Completed
DFPS will procure Community-Based Care contracts in additional areas of the state dependent on legislative direction and appropriation.	Ongoing
HTCE will coordinate with Community-Based Care providers to improve to identify, report, recover, and restore children and youth who are trafficked.	Ongoing

### Summary of Community-Based Care Implementation

The 87th Texas Legislature continued support for implementation of five total Community-Based Care catchment areas to Stage I over the fiscal years 2022-2023 biennium and expansion to Stage II into two areas.

DFPS renewed its existing contract with Our Community Our Kids (OCOK)/ACH Child and Family Services in Region 03b on September 1, 2018, to include all Community-Based Care services. During fiscal year 2020, DFPS and OCOK announced the beginning of the start-up period for Stage II implementation in the Metroplex West, formerly DFPS Region 03b community, and successfully completed all start-up activities. DFPS formally certified OCOK readiness on February 27, 2020. On March 1, 2020, OCOK assumed responsibility for all substitute care services to children and families in the Metroplex West community. Stage II continues for this SSCC.

In June 2018, DFPS awarded a contract to 2INgage, a new partnership between Texas Family Initiative, LLC, and New Horizons Ranch and Center Inc., to serve as the SSCC for the Big Country and Texoma, formerly DFPS Region 02, Abilene and Wichita Falls area. 2INgage implemented Stage I Community-Based Care (placement services) on December 1, 2018, after a six-month start-up period. DFPS and 2INgage announced the beginning of the six-month start-up period for Stage II in December 2019.

On June 1, 2020, 2INgage assumed responsibility for all substitute care services to children and families in the Big Country and Texoma formerly DFPS Region 02 community.

In July 2019, DFPS awarded a contract to St. Francis Community Services, Inc., to serve as the SSCC for the Panhandle area, formerly DFPS Region 01, Amarillo, and Lubbock. St. Francis began serving children in the Panhandle community on January 6, 2020, after a six-month start-up period. On March 2, 2022, St. Francis assumed responsibility for all substitute care services for children and families in the Panhandle community.

In September 2020, DFPS release a request for applications for the South Central and Hill Country community, formerly DFPS Region 08b and 27 counties in DFPS Region 08, excluding Bexar County, which closed on December 1, 2020. DFPS awarded a contract on March 29, 2021, to Belong, a division of SJRC Texas, to serve as the SSCC for the South Central and Hill Country community. Implementation of Stage I began on October 27, 2021, and startup activities for Stage II began on April 1, 2022. On October 1, 2022, Belong assumed responsibility for all substitute care services for children and families in the South Central and Hill Country community.

DFPS and the Office of Community-Based Care Transition (OCBCT) received funding for four new catchment areas in the fiscal years 2022-23 biennium. The requests for applications were released in the following catchment areas in April 2022: Metroplex East, formerly DFPS Region 03E); Permian and Concho, formerly DFPS Region 09; Piney Woods, formerly DFPS Region 04; and Deep East Texas, formerly DFPS Region 05.

On February 23, 2023, DFPS awarded a contract to EMPOWER, collaborative of Spraberry, Adrienne Family Initiative, The Bair Foundation, Jonathan's Place, Pathways Youth and Family Services, and CK Family Services, to serve as the SSCC for the Metroplex East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On February 23, 2023, DFPS awarded a contract to 4Kids4Families, a division of Arrow Child and Family Ministries, to serve as the SSCC for the Piney Woods community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On March 15, 2023, DFPS awarded a contract to Texas Family Care Network, a division of Pressley Ridge, to serve as the SSCC for the Deep East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On March 23, 2023, DFPS and OCBCT posed a request for applications for the entire Metroplex West community to include all 10 counties in the area. This application will close on April 20, 2023, with anticipated contract start date to be September

1, 2023.

Contingent upon legislative appropriations, DFPS and OCBCT will post a request for applications for a SSCC in the following community areas: Bexar County; Harris County; Bay Area and Montgomery; and El Paso.

### **Performance Measures**

As required by the 2020-21 General Appropriations Act, House Bill 1, 86th Texas Legislature, 2019 (Article II, DFPS Rider 15), DFPS and OCBCT are required to report on selected performance measures that allow for comparative analysis between the legacy foster care and redesigned foster care systems on March 31 and September 30 each year. The report includes an analysis of the data that identifies trends and impact occurring in the redesigned foster care system, identification and analysis of factors negatively impacting any outcomes, recommendations to address problems identified from the data, and any other information necessary to determine the status of the redesigned foster care system. DFPS submitted the September 2022 and March 2023 Rider 15 reports, as required. The next report will be released with fiscal year 2022, quarter 3 data in September 2023.

### **Foster Care Capacity Stage I Objective**

The performance indicator most reflecting the foster care capacity challenge is the percentage of children placed close to home, defined in the metric as within 50 miles of removal. The percentage of children placed close to home continued to decline since fiscal year 2021 for the state, as well as for non-Community-Based Care areas. It has increased for SSCC providers in the Panhandle, Metroplex West, and Big Country and Texoma designated community areas in fiscal year 2023, quarter 1 compared to fiscal year 2021. Placement proximity has decreased for South Central and Hill Country in comparison to its baseline years, fiscal years 2020 and 2021.

The ability to place siblings in foster care together is another area impacted by system-wide foster care capacity challenges. SSCC providers in the Panhandle, Big Country and Texoma, and Metroplex West show performance improvements in keeping siblings together, increasing from fiscal year 2021 by 0.4 percent, 8.0 percent, and 0.3 percent, respectively. South Central and Hill Country has seen a decrease of 7.1 percent in comparison to its baseline years. Non-Community-Based Care areas have declined, with a 1.9 percent decrease in performance in fiscal year 2023, Quarter 1 compared to fiscal year 2021.

Statewide, children are spending fewer placement days in a least restrictive setting compared to fiscal year 2021, and all designated community areas also saw a decrease in children placed in least restrictive settings.

All safety performance below 100 percent is an area to target for improvement. Statewide and Statewide Non-Community-Based Care child safety improved in fiscal year 2023, Quarter 1 compared to fiscal year 2021, quarter 1 with all designated community areas improving compared to fiscal year 2021, quarter 1 except Panhandle and Big Country and Texoma. South Central and Hill Country had the highest safety rate in fiscal year 2023 Quarter 1 at 100 percent.

### **Permanency Stage II Objective**

While placement with relatives or kin are the Stage II contract performance measures, the goal of Stage II is to improve exits to permanency, including both the number of children exiting to permanency and the speed at which they exit. Placement with kin generally improves child outcomes, including permanency, either with exits to kin or by facilitating connections to parents and placement stability, which are positively related to permanency.

Texas has historically performed well in placing children in state conservatorship with relatives or kin and finding relatives or kin to permanently care for children when reunification with parents is not possible. The performance measure is important to ensure SSCCs sustain or improve upon these trends. Non-Community-Based Care areas of the state declined by 3 percent between fiscal years 2021 and 2022. Metroplex West and Big Country and Texoma saw an increase between fiscal years 2021 and 2022 with 8.0 percent and 0.4 percent, respectively, and Panhandle had a decrease in children being placed with kin at 60 days after removal. South Central and Hill Country started Stage II in fiscal year 2023; and therefore, no data is available to report on SSCC performance for that area, as this measure is delayed.

With four designated community areas in Stage II, Section A performance metrics related to permanency become relevant. This report will not, however, give detailed attention to the Section A exit measures because the focus of this report is the Community-Based Care contracted performance measures. Risk adjusting for case mix has the advantage of determining if the change seen in the exit population was due to a process slow down/speed or is attributable to change in the child population characteristics. That being said, it is worth noting there has been a statewide drop in the percent of the population exiting to permanency within 12 months since fiscal year 2018, as well in declines in all of the SSCC designated community areas from fiscal year 2022 to fiscal year 2023, Quarter 1.

### **Our Community, Our Kids – Metroplex West (Tarrant, Erath, Hood, Johnson, Palo Pinto, Parker, and Somervell counties**

OCOK has contracted with DFPS for services to children in foster care since fiscal year 2015. Beginning in fiscal year 2020, Quarter 3, OCOK transitioned to Community-Based Care Stage II to include the provision of case management and kinship services for all children in conservatorship in designated community area Metroplex West, made up of the 7 counties around Fort Worth. The average performance for fiscal years 2018 and 2019 is used as the baseline average for comparison.

- **Safety in Foster Care** – 99.8 percent of children were safe in foster care placements as of fiscal year 2023, Quarter 1.

Safety below 100 percent represents an area for improvement;

- **Placement Stability in Foster Care** – 1.18 foster care placements per child in fiscal year 2023, Quarter 1 shows an increase from the fiscal year 2022, Quarter 1 measure of 1.17.7 This metric is cumulative and requires a comparison of like quarters;
- **Least Restrictive Placement Setting** – 82.9 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline, but increased since fiscal year 2022;
- **Foster Care Placement within 50 miles** – 72.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter. This is an increase from fiscal year 2022 and slightly below the baseline years;
- **Sibling Groups Placed Together in Foster Care** – 63.3 percent of sibling groups were placed together on the last day of the quarter. This is below baseline but has increased since fiscal year 2022;
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time; and
- **Preparation for Adult Living** – 94.1 percent of youth turning 18 (includes youth in foster care, kinship care, and other settings in Stage II) completing Preparation for Adult Living shows a slight decrease from the previous year but well above baseline.

### **2INGage – Big Country and Texoma**

2INGage has contracted with DFPS for services to children in foster care since fiscal year 2019. Beginning in fiscal year 2020, Quarter 4, 2INGage transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Big Country and Texoma designated community area. This area is comprised of 30 counties covering a large rural area with historical capacity challenges. The average performance for fiscal years 2021 and 2022 is used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in 2INGage foster care placements. Safety below 100 percent represents an area for improvement.
- **Placement Stability in Foster Care** – 1.13 placements per child in fiscal year 2023, Quarter 1 is an improvement from fiscal year 2022, Quarter 1 performance of 1.14. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 86.7 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has declined since fiscal year 2021 and is lower than baseline.
- **Foster Care Placement within 50 miles** – 41.1 percent of children placed within 50 miles of their removal address on the last day of the quarter is an improvement from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 68.4 percent of sibling groups placed together. This is an increase from baseline years.

- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 77.8 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living in fiscal year 2023, Quarter 1, showing a large decrease from fiscal year 2022. Performance is below baseline.

### **Saint Francis Community Services, Inc. – Panhandle**

St. Francis has contracted with DFPS for services to children in foster care since fiscal year 2020. Beginning in fiscal year 2022, Quarter 3, St. Francis transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Panhandle designated community area. This designated community area is comprised of 41 counties in an area of the state that faced significant capacity challenges prior to Community-Based Care implementation. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in Saint Francis foster care placements. Performance below 100 percent is an area for improvement.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is lower than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.49 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has seen continued decline since fiscal year 2020 and is below baseline years.
- **Foster Care Placement within 50 miles** – 42.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter, an increase from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 63.8 percent of sibling groups placed together on the last day of the quarter is above baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 61.5 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living which is a large decrease from baseline years.

### **Belong- South Central and Hill Country**

Belong began serving children on October 27, 2021, and entered Stage II in fiscal year 2023, Quarter 1. Beginning in fiscal year 2023, Quarter 1, Belong transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the South Central and Hill Country designated community area. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 100 percent of children were safe in Belong foster care placements. 100 percent is always the target for safety.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is higher than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.1 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline years.
- **Foster Care Placement within 50 miles** – 37.7 percent of children were placed within 50 miles of their removal address on the last day of the quarter, a decrease from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 55.4 percent of sibling groups placed together on the last day of the quarter, a decrease from baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 76.9 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living which is a large decrease from baseline year.

**Strategy 1.14a Lead: Hollie Mims**

**Strategy 1.14a: DFPS will continue to implement Community-Based Care Stage I**

**Rationale:** DFPS must establish effective practices for assessing the comprehensive needs of children, youth, and families to create a child welfare service delivery system responsive to these needs and can affect positive client outcomes. DFPS is implementing Community-Based Care to promote community ownership, flexibility, and innovation in providing residential and child protective services that meet the unique needs of local children and families. In Community- Based Care Stage I, the SSCC is responsible for developing a continuum of foster care and services for children to meet outcomes including placing children close to home in stable, least restrictive settings.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. DFPS will continue to support Regions 03b, 02, and 08a catchment areas in stage I implementation.	September 2020 and ongoing thereafter	DFPS continues to provide support and technical assistance for implementation in all areas. Regions 03b and 02 are now in Stage II. As of April 29, 2021, Family Tapestry notified DFPS of its intent to terminate the contract with DFPS for 08a, and that contract was moved back to state run in July 2021.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
b. DFPS will implement Stage I Community-Based Care in Region 01.	January 2020	On January 6, 2020, St. Francis Community Services began serving children in Region 01 after a six-month start-up period and confirmation of readiness by DFPS. As of March 2021, St. Francis Community Services was serving 1,062 children in foster care. Region 01 was moved to Stage II in March 2022.
c. DFPS will procure a SSCC in Region 08b catchment area.	January 2021	In September 2020, DFPS released a request for applications for the Region 08b catchment area (27 counties in DFPS Region 08, excluding Bexar County) which closed on December 1, 2020. DFPS awarded a contract on March 29, 2021, to BELONG, a division of St. Jude's Ranch for Children (SJRC) Texas, to serve as the SSCC for Region 8b. Implementation of Community-Based Care Stage I began in October 2021 following a successful six-month start-up period and confirmation of readiness.
d. DFPS and OCBCT will implement Stage I in Region 08b.	October 2021	Stage I for Belong started October 27, 2021, following a successful six-month start-up period and confirmation of readiness.
e. DFPS OCBCT will procure SSCCs in Regions 03E, 04, 05, and 09.	Ongoing	Depending on successful bidders, DFPS and OCBCT plans on awarding new SSCC contracts in Regions 03e, 04, 05, and 09. The requests for applications were released on April 29, 2022.
f. DFPS and OCBCT will implement Stage I in Regions 03E, 04, and 05.	Ongoing	Depending on bidders and contract awards, DFPS/OCBCT will stagger implementation of Stage I in Regions, 3E, 4, and 5.
g. DFPS will continue with statewide implementation based on the Texas Legislature's direction and appropriation of funds.	Ongoing	DFPS publishes an annual Community-Based Care implementation plan, which was most recently published in December 2022. The plan is available on the DFPS public website. DFPS has requested in its Legislative Appropriations Request (LAR) the funding to implement Community-Based Care in four new catchment areas in the 2024-25 biennium. Subject to appropriations, DFPS will release Requests for Application (RFA) in the 4 new areas, and plan to do at least four 4 new Stage I and four 4 new Stage II areas in the following two-year biennium.

**Strategy 1.14b Lead: Hollie Mims**

**Strategy 1.14b: DFPS will implement Community-Based Care Stage II for up to three SSCCs operating in Stage I who advance to a six-month Stage II start up period and are certified for implementation based on completion of all readiness activities.**

**Rationale:** In Stage II, the SSCC will assume responsibility for case management and other services currently provided by CPS and work toward reunifying children with their families, when possible, or placing children permanently with relatives. The SSCC will also provide adoption and transitional living services.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. DFPS and each SSCC will jointly decide and formally announce beginning the six-month Stage II start up period for catchment areas 03b, 02, and 08a.	June 2020	DFPS and Region 03b announced Stage II start-up in October 2019. DFPS and Region 02 announced Stage II start-up in December 2019. Region 03b went live into Stage II on March 1, 2020, and Region 02 went live to Stage II on June 1, 2020. In Region 8a, Family Tapestry notified DFPS of its intent to terminate its contract as the SSCC for 08a. The 08a contract was terminated at the end of June 2021 and returned to state run July 2021.
b. DFPS and each SSCC will jointly decide and formally announce beginning the six-month Stage II start up period for catchment areas 01 and 08b.	Ongoing	Readiness for Region 01 started September 2021 and Saint Francis went live March 2022. Region 08b Stage II readiness activities started in April 2022 and went live October 2022.
c. DFPS will effectively implement a Stage II transition plan resulting in successful implementation in each area by the projected go live date.	Ongoing	DFPS successfully advanced to Community-Based Care Stage II in Region 03b on March 1, 2020. DFPS implemented Stage II services in Region 02 on June 1, 2020, after readiness activities were completed. DFPS successfully advanced to Community- Based Care Stage II in Region 1 on March 2, 2022, after readiness activities were completed. The projected go live for Stage II in Region 08b was October 2022, contingent upon readiness certification. In Region 08a, Family Tapestry notified DFPS of its intent to terminate its contract as the SSCC for 08a. Transition to Stage II was not initiated.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
d. DFPS will develop and refine stage II transition planning processes including the requirements for certification of readiness.	Fall 2019 and Ongoing	Stage II readiness tools and processes were developed Fall 2019. Process updated in December 2019 and December 2020. Continual process improvements are underway to ensure a smooth transition for each catchment. These efforts are collaborative and coordinated between DFPS and the OCBCT. In Spring 2022, OCBCT made a change that going forward the timeline between Stage I to Stage II was reduced to 12 months rather than 18 months, so long as everyone is in agreement with readiness. Belong was the first SSCC to implement this new timeline.
e. DFPS and OCBCT will continue to support Regions 08b, 03b, 02, and 01 catchment areas in Stage II.	Ongoing until Stage III	DFPS continues to provide support and technical assistance for all areas in Stage II.
f. DFPS and OCBCT will implement Stage II Community-Based Care in Region 01.	March 2022	On January 6, 2020, St. Francis Community Services began serving children in Region 01 after a six-month start-up period, and confirmation of readiness by DFPS. As of March 2021, St. Francis Community Services was serving 1,062 children in foster care. St. Francis entered Stage II on March 2, 2022. For fiscal year 2022, St. Francis is serving 2,078 children in foster care.
g. DFPS and OCBCT will implement Stage II in Region 08b.	October 2022	As of April 2022, readiness activities for Belong to move into Stage II in six months began. The anticipated timeframe for belong to begin Stage II was October 2022.
h. DFPS and OCBCT will finalize Stage III and implement in Regions 03B, 02, and 01.	Ongoing	After finalizing Stage III, DFPS and OCBCT will implement Stage III in every Community-Based Care area operating for at least 18 months. At this point, 0 Regions 03B, 02, and 01 are anticipated to move to Stage III.

**Strategy 1.14c Lead: Hollie Mims**

**Strategy 1.14c: DFPS will implement Community-Based Care using a performance-based contract and direct oversight activity toward supporting continuous quality improvement and improved outcomes for children and families.**

**Rationale:** The SSCC assumes responsibility for assessing the foster care and service needs of children and families and developing a network of services to meet those needs. In Stage II, the SSCC assumes case management oversight and responsibility for permanency outcomes. DFPS uses the continuous quality improvement process to assess performance trends and the effectiveness of the specific strategies each Single Source Continuum Contractor is implementing to develop quality programs and build the service continuum to address service gaps and needs.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Continue to implement quarterly multi-disciplinary oversight of each SSCC contract focused on supporting continuous quality improvement.	Ongoing	DFPS developed and continues to implement a quarterly reporting format in which regional leadership leads the oversight effort drawing on expertise from local and state office subject matter experts in the areas of program, contracts, finance, and data and systems improvement. Quarter 1 reviews held in February and March 20221 for all areas. Quarter 2 reviews held in April and May 2021 for all areas.
b. Develop Stage II performance measures and reporting structure and establish performance baselines.	Ongoing	New contract measures included in Stage II contract amendment. Developed the coding for Stage II performance reporting and in the process of producing historical performance data. Working with Chapin Hall to produce historical baselines for paid care days, the fiscal model for incentives and remedies.
c. Develop and implement Stage II case management oversight processes.	Ongoing	DFPS hired and trained case management oversight staff in Regions 08b, 03b, and 0 2, and 01 and finalized case read tools and data reports for oversight of case management services. DFPS continues to develop processes for providing technical assistance during the first year of Stage II implementation and beyond.

**Strategy 1.14d Lead: Blanca Denise Lance**

**Strategy 1.14d: HTCE will coordinate with Community-Based Care contractors (i.e., SSCCs) to identify, report, recover, and restore children and youth who are trafficked.**

**Rationale:** DFPS must establish effective practices for assessing the comprehensive needs of children, youth, and families

to create a child welfare service delivery system that is responsive to these needs and can affect positive client outcomes. DFPS is implementing Community-Based Care to promote community ownership, flexibility, and innovation in providing residential and child welfare services that meet the unique needs of local children in DFPS conservatorship and families.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. HTCE will provide technical assistance to SSCCs on the DFPS Human Trafficking Response Protocol for any area that transition to Community-Based Care Stage II.	8/31/23 and ongoing	Belong transitioned to Stage II without direct technical assistance from HTCE; however, all existing practices, policies, and trainings were provided to support its transition. To better support transitions for new SSCCs, HTCE will coordinate with newly identified SSCCs during Stage I to conduct a tailored assessment on their individual technical assistance needs provided in Fall 2023.
b. HTCE will provide technical assistance to OCBCT and SSCCs on Texas Care Coordination for Commercially Sexually Exploited Youth.	Ongoing	<p>Since 2018, DFPS' partnership with the Office of the Texas Governor's Child Sex Trafficking team, Children's Advocacy Centers of Texas, Inc., and local communities to establish care coordination teams across the state to provide youth victims of sex trafficking with a continuum of care has continued. As various communities embark on developing care coordination teams, HTCE ensures SSCCs are included in all development meetings, if the community is a part of a SSCC catchment area.</p> <p>Since April 2022, HTCE has worked collaboratively with the Office of the Governor's Child Sex Trafficking team and Children's Advocacy Centers of Texas to develop a unified approach to care coordination via a Logic Model. Currently the team is working on the associated Implementation packet to support both developing and existing teams in aligning with the Logic Model.</p> <p>On March 27, 2023, OCBCT conducted an overview training of Community-Based Care HTCE, the Office of the Governor, and Children's Advocacy Centers of Texas, Inc., so the Texas Logic Model can ensure SSCC, and Community-Based Care are appropriately integrated into the model.</p>
c. HTCE will work with SSCCs to support their technical assistance needs on Human Trafficking.	8/31/2023 and ongoing	<p>Key accomplishments that support SSCC efforts:</p> <p>HTCE and DFPS Legal developed contractual language that will support continuum of service for care coordination and advocate agency services in SSCC catchment areas.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>All trainings developed by HTCE are provided to SSCC to support their human trafficking technical assistance needs. This includes <i>Foundations of Human Trafficking</i>, care coordination overview, and the region-specific human trafficking advocate trainings as they are made available as elective courses.</p> <p>Additionally, HTCE created overviews on understanding human trafficking resources tip sheets that included care coordination teams, human trafficking advocate agencies, and the Commercial Sexual Exploitation-Identification Tool. These were also shared with the SSCCs. The tip sheets were provided in March 2022 to support SSCC and legacy staff in understanding their expectations in utilizing these resources.</p> <p>SSCC staff designated as missing children regional coordinators are included in monthly calls to support any technical questions and needs on missing children and the intersection with human trafficking efforts.</p> <p>Since March 2022, HTCE and OCBCT work collaboratively to strategize and support their efforts in working with SSCCs. In June 2022, HTCE invited OCBCT and the SSCCs to participate in the Light the Way End Human Trafficking 2022 Summit. Plans are underway to include SSCCs in the August 2023 summit.</p> <p>Since Fall 2022, HTCE has completed a variety of case-specific technical assistance calls to support case management and planning needs for identified victims of trafficking. In Summer 2023, HTCE will develop a project plan for routinely providing technical assistance around missing children and human trafficking to each SSCC. Also, in June 2023, HTCE will pilot an in-person supervisor/management training for St. Francis.</p> <p>In Summer 2023, SSCCs will be invited to participate in Recovery Innovations and Strategic Engagement (RISE) Technical Assistance from the Office of Trafficking in Persons as HTCE works to evolve policies and practices around missing children and human trafficking intersections for enhanced compliance with federal expectations.</p>

**Strategy 1.14e Lead: Heather Thorp**

**Strategy 1.14e: The FFPSA division will coordinate with internal and external stakeholders to assess the feasibility of implementation.**

**Rationale:** DFPS must analyze the impact of the federal legislation for all facets of the Texas child welfare system, including prevention strategies. The legislation is complex and impacts all external stakeholders. DFPS is seeking guidance from the

87th Texas Legislature on implementation of the Family First Act.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>a. Solicit input from external stakeholders regarding the FFPSA impact.</p>	<p>September 2020</p>	<p>Because FFPSA is transformative to the child welfare system, DFPS adopted a holistic approach to utilize already existing and naturally occurring groups of stakeholders from which to initiate engagement. DFPS engaged with those who are involved in the work and those who will be affected by the changes to our system, including engaging with staff throughout DFPS. DFPS conducted in-person and virtual meetings to discuss the provisions of the bill and gather input from more than 20 stakeholder groups.</p> <p>DFPS hosted a FFPSA update webinar to provide external stakeholders with an overview of the strategic plan which was released in September 2020. The webinar was recorded and posted to the DFPS public website.</p> <p>Between May and June 2020, PEI conducted a series of virtual meetings with Texas communities to discuss readiness for the FFPSA framework. The communities convened were Amarillo, Corpus Christi, Houston, Odessa, El Paso, and San Antonio. Overall, the input received through these virtual meetings emphasized the need for mental health and substance abuse community services across the state, as well as the need for increased local collaboration and coordination.</p>
<p>b. Survey behavioral health service providers.</p>	<p>September 2020</p>	<p>DFPS contracted with the University of Houston to conduct a study and produce a report to inform Texas' strategic plan with regard to Qualified Residential Treatment Programs (QRTPs). There were two main deliverables:</p> <ol style="list-style-type: none"> <li>1. A survey of residential care providers to determine the landscape of providers as it relates to QRTPs. The survey explored the following topics:               <ol style="list-style-type: none"> <li>a. What accreditation requirements does each provider meet, if any?</li> <li>b. Which providers are currently seeking accreditation?</li> <li>c. Costs incurred or associated with accreditation.</li> </ol> </li> <li>2. Focus groups to gain input from three main groups of General Residential Operation providers:               <ol style="list-style-type: none"> <li>a. Currently accredited;</li> <li>b. Not currently accredited and have not initiated accreditation; and</li> <li>c. Currently in the process of accreditation.</li> </ol> </li> </ol> <p>The University of Houston completed the survey in June 2020 and three focus groups</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>consisting of a total of 47 participants.</p> <p>In July 2019, Texas Alliance for Children and Family Services partnered with Casey Family Programs to distribute a survey to determine the readiness of service provider agencies to provide evidence-based programs. This survey was distributed to HHSC, PEI programs, the Children’s Advocacy Centers, the Texas Council of Community Centers, and DFPS contract providers. The survey intended to conduct a needs assessment and gap analysis of the provider community. The survey report was finalized April 2020. Links to the University of Houston report and the Texas Alliance for Children and Family Services report were included in the FFPSA strategic plan.</p>
c. Develop and share Strategic Plan with Texas Legislative officials.	September 2020	Pursuant to Senate Bills 355 and 781, 86th Legislature, Regular Session (2019), DFPS was required to submit a strategic plan for prevention services and residential care as it relates to FFPSA. The Texas FFPSA Strategic Plan was submitted to the Texas Legislature on September 1, 2020, and published to the DFPS public website at: <a href="#">Family First Prevention Services Act: Strategic Plan</a> .
d. Serve as a resource in legislative hearings when FFPSA resources are needed.	June 2021	Legislative hearings where FFPSA was discussed in the 87th Texas Legislative Session include the Senate Committee on Finance on February 25, 2021; the House Appropriations Committee March 2, 2021; House Human Services on March 30, 2021, and April 4, 2021; and Senate Health and Human Services April 7, 2021.
e. Notify the ACF of the decision.	September 2021	The Texas FFPDS Strategic Plan published in September 2020 outlined multiple implementation options related to FFPSA prevention services for the 87th Texas Legislature’s consideration. The Texas Legislature provided guidance on FFPSA activities; however, a Title IV-E prevention plan has not been submitted at this time.
f. Submit a grant application for FFTA funds available.	April 30, 2020	On December 20, 2019, the President signed a year-end spending package that included FFTA monies designated for FFPSA. Texas received \$50,265,902 in funding, and the Texas Legislative Budget Board approved spending \$16.4 million of these funds in October 2020 to spend pursuant to the Fiscal Years 2020-21, General Appropriations Act, House Bill 1, 87th Legislature, Regular Session 2019, (Article IX, Sec. 13.02). An estimated \$8.0 million of the funds will be expended on a QRTP pilot and an estimated \$8.4 million will be expended on Information Technology enhancements to incorporate new federal FFPSA requirements. The Texas QRTP model and subsequent solicitation were implemented June 2022. The remaining grant amount estimated to be \$33.9 million will be expended on evidence-based practices. Types of services and populations served

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
will be based on direction from the 87th Texas Legislature.		
g. Complete IMPACT enhancements related to congregate care and FFPSA Title IV-E claiming.	September 2021	DFPS began an IT project in October 2020 to make enhancements to the IMPACT system necessary to ensure foster care maintenance payments for children in congregate care placements are paid in accordance with FFPSA Title IV-E claiming rules. These IT changes went live on September 29, 2021. DFPS utilized FFTA funds for this project.
h. Complete IMPACT enhancements related to an ICPC NEICE system.	September 2022	In 2019, DFPS applied for and was awarded federal grant funds to assist Texas in coming into compliance with the NEICE FFPSA provision. DFPS finalized the NEICE charter and held a kickoff meeting on October 1, 2021. Training and communication plans have been put in place. The process analysis (e.g., As-Is, To-Be, Gap Analysis), has been completed. The business and functional requirements and screen mock-ups (functional design) are complete. The Technical Design (integration, data mapping, technical solution) is currently in process. Texas launched NEICE on March 15, 2023.
i. Begin a Title IV-E reimbursement pilot for foster care maintenance expenses for a child in conservatorship of the state when placed with a parent in a licensed, residential substance use disorder treatment facility.	September 2022	In Texas, certain facilities provide accommodation placement of children with their mother during treatment. These facilities are referred to as Women and Children's Residential Treatment programs. Texas currently has approximately 10 Women and Children's Residential Treatment Programs. DFPS is working on an open enrollment opportunity to enhance this service. This contract would provide additional funding to support the room and board of children in DFPS conservatorship who can stay with their mother in inpatient residential substance used treatment. DFPS anticipates executing contracts for services begin in fiscal year 2024.
j. Release a procurement for the QRTP pilot.	January 2022	Two QRTP program specialists hired in March 2021 are developing the Texas QRTP model, QRTP assessment process, procurement documents, IT needs and changes, communication, and training needs for full implementation. DFPS established and facilitated workgroups needed for the QRTP pilot program and the accreditation grant request for applications procurement type. A variety of workgroups met weekly, monthly or bimonthly from April 2021 to June 2022. In July 2022, two additional positions were hired and completed training to support placement coordination and eligibility activities for the QRTP pilot program. DFPS initially suggested a limited procurement for the QRTP pilot since it is a

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>new service type, but after meetings and workgroups throughout the months of March, April, and May 2021, and after legal review, it was determined an open enrollment process would be appropriate and better position DFPS to meet important initial timelines, as well as position DFPS to begin serving the first youth through the QRTP pilot by approximately March 2022 through a shortened timeline. However, due to workgroup scopes and procurement timeframes including necessary approval processes, it was determined in March 2022 that the original timeline for achieving readiness to serve the first youth by the end of June 2022, needed to be reinstated.</p> <p>The QRTP open enrollment procurement documents and all required supplemental documents were published on April 1, 2022. Providers were allowed a minimum of 30 days to review and provide their response. During the months of May and June 2022, DFPS completed internal trainings and informational webinars for DFPS caseworkers, as well as external trainings and informational webinars for legal stakeholders and providers. DFPS created both internal and external QRTP webpages which became accessible on June 30, 2022.</p> <p>DFPS met the goal of readiness to serve the first youth by the end of June 2022. In July 2022, DFPS prepared amendments to the open enrollment to clarify contract terms that will better solicit providers to become QRTPs and meet the needs of the targeted population of children and youth. These amendments were posted on September 2, 2022. All open enrollment information, documents, and supplementals are posted on the Electronic State Business Daily site at: <a href="https://www.txsmartbuy.com/esbddetails/view/HHS0011971">https://www.txsmartbuy.com/esbddetails/view/HHS0011971</a></p> <p>Currently, there are three pending contracts for QRTP providers. Two are located within SSCC areas, and one is located within a legacy contract area. DFPS will be handling the QRTP contracts during an initial pilot phase of approximately 12 to 18 months.</p> <p>The QRTP team has also completed procurement activities to release request for applications procurement type to extend a limited number of accreditations grants to existing licensed and in-process operations to support accreditation and incentivize QRTP contracts. DFPS allotted \$1.5 million toward these grants and planned to issue multiple awards. The request for applications was published on August 24, 2022, with award selection occurring in December 2022. Currently, there are four award contracts pending execution. At the closure of the current request for applications, DFPS plans to create an additional request for applications procurement type in order to extend the accreditation grant opportunity and to expend the remaining funds.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
k. Begin serving pregnant and parenting youth in care through the Nurse Family Partnership program.	Ongoing	The Fiscal Years 2020-21 General Appropriations Act, House Bill 1, 87th Legislature, Regular Session, 2019, (Article II, DFPS Rider 48[c]), directed DFPS to use a portion of FFTA funds for the Nurse Family Partnership program to expand capacity as allowed by FFPSA. PEI finalized contract updates to incorporate these additional funds into eight Nurse Family Partnership contracts to serve pregnant and parenting youth in foster care. All eight sites began hiring and recruiting eligible families immediately. PEI also added mental health consultation services to the contract with the Nurse Family Partnership National Service Office to better support Nurse Family Partnership sites providing services to pregnant and parenting youth in foster care.
l. Begin providing court-ordered, time limited evidence-based FFPSA services through the House Bill 3041 pilot to FBSS families.	Ongoing	House Bill 3041, 87th Legislature, Regular Session, 2021, required DFPS to establish a court-ordered, time limited, evidence-based service pilot for children who are at imminent risk of being removed.  On March 18, 2022, DFPS released a grant funding opportunity for current SSCCs to apply to participate in the pilot project. Applicants proposed at least one evidence-based program approved by Title IV-E Prevention Services Clearinghouse evaluated and rated as well-supported in the areas of mental health or substance abuse. SSCCs could also propose additional evidence-based programs approved by the Title IV-E Prevention Services Clearinghouse evaluated and rated as well-supported and/or supported in the areas of mental health, substance abuse, or in-home parent skill-based to ensure services are available for families with children aged 0 to 17 years. DFPS executed contract amendments with four SSCCs as of August 31, 2022. DFPS and the SSCCs are working together to find ways to engage more families into the Texas Family First Pilot. DFPS is utilizing FFTA funds to implement this pilot program.
m. Submit Senate Bill 910 report to the Governor and legislative leadership.	October 2022	Senate Bill 910, 87th Legislature, Regular Session, 2021 required DFPS to study and develop a comprehensive list of options for implementing family preservation services into existing Community-Based Care catchment areas. This study of implementation options was submitted to the Governor and legislative leadership on October 1, 2022.
n. Expand evidence-based home visiting	Ongoing	Rider 48(e)-87R directed DFPS to use a portion of FFTA funds to support the transition of family-based safety services to evidenced-based programs under FFPSA. PEI added capacity to existing evidence-based programs to serve a portion of FBSS families. PEI

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
programs to serve FFPSA eligible populations.		identified SafeCare and Parents as Teachers as the most appropriate FFPSA approved evidence-based models for this project.
o. Serve as a resource in legislative hearings when FFPSA resources are needed.	June 2023	Legislative hearings where FFPSA has been discussed in the 88th Texas Legislative Session include the Senate Committee on Finance on February 21, 2023; the House Appropriations Committee on February 15, 2023; the House Appropriations Committee, Article II Subcommittee on February 27, 2023; and Senate Health and Human Services on April 5, 2023.

**Goal 2: Recruit, develop, and retain quality employees (CFSR PIP Goals 6 and 1)**

**Rationale:** DFPS must recruit and retain employees to meet the needs of children and families. DFPS caseworkers work closely with the public, and the work is often urgent and done in an emotionally charged environment. It is important to recruit and retain frontline caseworkers who have the skill set to succeed in such a work environment. DFPS seeks to recruit employees who can best interact with clients and who want to make a career in the protective services field. DFPS also wants to retain experienced support staff shown to be a good fit for the agency.

DFPS has its own training division, CLOE, which works with DFPS programs and divisions to provide more than 12,000 staff with training and professional development. Within CLOE, there is the CPS and CPI training division, which designs, develops, and conducts CPS and CPI professional development for new CPS and CPI caseworkers based on the specific request from CPS and CPI State Office. Additionally, the CPS and CPI training division designs, develops, and conducts supervisor professional development and continuing education courses based on the need identified by CPS and CPI state office program. In 2021, CLOE in partnership with CPS and CPI, created specialized training for new hires in each division. This allows training to be specific for each stage of service, using various methods such as instructor-led classroom settings, hands on field training, testing, computer-and web-based training, and the learning management system as an online training environment.

CLOE also provides supervisor development training to new supervisors and advanced/upper-level management. DFPS LEADS (Leadership, Excellence, Advancement, Distinction, and Support) aids in the professional development of supervisors and managers at beginning, intermediate, and advanced levels:

- Upon hire, every promoted or newly hired supervisor/manager immediately attends a two-day course (*Beginning*

*Manager: Beginning Manager Transition from Peer to Manager*) that focuses on DFPS-related information and resources needed to work effectively and efficiently.

- For beginning and intermediate management, the LEADS primary focus includes the development of eight competencies: managing change, collaboration, communication, cultural competence, decision-making, integrity, professional development of self and others, and strategic thinking.
- For advanced management, the program continues competency development while adding on the enhancement of program-specific job functions that advanced and upper-level management staff must carry out on a daily basis.

In 2014, DFPS Executive Leadership established and implemented the Leadership for Advanced Management initiative within CLOE to provide leadership development for DFPS advanced and upper-level management. The focus of the Leadership for Advanced Management initiative is on enhancing program-specific job functions that advanced/upper management staff must carry out on a daily basis with the competency framework.

The Leadership for Advanced Management program is focused on managers at the level of:

- Program director and above who supervise staff in the regions; and
- Division administrator and above who supervise staff at the DFPS State Office.

CLOE also manages the DFPS Certification program. Certification is a voluntary process designed to recognize professional development beyond the basic skills required for DFPS specialists and supervisors. Staff is highly encouraged to seek certification which strengthens staff capacity because certified staff have met requirements for work-related training, experience, and performance.

**Goal 2 relates to CSFR PIP cross-cutting issues 1, 3, and 4.**

**Objective 2.1: Recruit and Retain Quality Workforce – Angela Pie and Lindsey Van Buskirk**

**Rationale:** DFPS requires a competent, detailed, professional, and stable workforce to achieve the outcomes the agency desires for the children and families served. Improved recruitment and hiring practices enable the agency to design options which may ultimately contribute to increased retention of staff. Staff retention leads to quality casework that in turn promotes positive outcomes for clients. Tenured staff are more efficient and effective due to the complex nature of the work performed by DFPS. Developing skills and knowledge base takes time and experience. DFPS has an opportunity to provide superior services by attracting and retaining the highest quality staff possible.

In response to legislative directive to reduce turnover, Workforce Development's *Human Resources Management Plan* was implemented and continues to use multiple initiatives to address the working environment and compensation. The results and progression of these initiatives are published on the agency's website at the beginning and middle of each fiscal year to monitor improvement throughout the year.

**Expected Outcomes**

- Hiring of quality job candidates will increase;
- Job vacancy rates will decrease; and
- CPS and CPI turnover rates will decrease.

**Outcome Measures**

- CPS and CPI vacancy rates; and
- Quarterly/annual CPS and CPI turnover rates.

Interim Benchmark/Milestone	Target Completion
Maintain an internet presence with job postings.	Ongoing
Use pre-employment written test.	Ongoing
Focus on hiring candidates with targeted degrees (e.g., social work, counseling, early childhood education, psychology, criminal justice, elementary or secondary education, sociology, and human services).	Ongoing
Increase starting pay for social work graduates.	Ongoing
Increase starting pay for bilingual hire.	Ongoing
Offer 6.8 percent above base in certain approved locations.	Ongoing
Offer locality pay in certain locations in Texas.	Ongoing

Interim Benchmark/Milestone	Target Completion
Organize hiring fairs in specific locations to interview many staff in one or two days.	Ongoing
Post jobs on job search websites or newspapers that target needed professionals.	Ongoing
Request positions in certain locations be posted as a "hot job" in database of the DFPS personnel and job application system.	Ongoing
Offer retention stipends to CPI caseworkers and supervisors.	Ongoing
Continue calls by regional management to staff in the 6 to 24-month tenure range.	Ongoing
Evaluate existing retention strategies and expand proven effective retention strategies across the agency. Implement statewide performance recognition campaign.	Ongoing
Maintain regional and statewide supervisor and caseworker advisory committees.	Ongoing
Recognize exemplary work through Regional Director Awards and CPS Award of Distinction.	Ongoing
Provide merit raises as funding is available.	Ongoing
Provide enhanced training for supervisors and program directors to improve quality of leadership and support.	Ongoing
Provide regional management workforce reports to view trends and vacancies and assist with retention.	Ongoing

### Summary

DFPS continues to focus on increasing the quality of job candidates in an effort to drive down vacancy rates. Employment selection instruments help identify the most qualified applicants based on child welfare research and predictive validation studies from previous years. Tools include: 1) a written statement of interest that allows the candidate to express their passion for child welfare work. DFPS added stage-specific interview questions in hopes of identifying a potential employee's match for a specific type of CPI or CPS worker position. DFPS no longer has an assessment vendor to resolve process

questions, monitor screening services, and secure bilingual testing. These services are done in house within the Talent Acquisition Group (TAG) division.

The CPS and CPI professional development model (formerly basic skills development), was revamped in 2021 and is the method by which new staff are trained. In December 2016, DFPS added a supervisor professional development model as part of enhanced leadership development processes. In addition, DFPS has also implemented a supervisor assessment for screening supervisor candidates prior to an interview. The process also includes a hiring board to ensure a diverse panel is evaluating each candidate.

### Summary of Employee Turnover Comparison Report as of Fiscal Year 2022, Quarter 2

Functional Title	Turnover Rate FY 2019	Turnover Rate FY 2020	Turnover Rate FY 2021	Turnover Rate FY 2022	Turnover Rate FY 2023 Year-To-Date	Percentage Change FY 2022 to FY 2023 Year-To-Date
All Employees	19.3%	18.5%	23.8%	29.0%	26.6%	-8.3%
CPS Workers	17.3%	20.7%	21.2%	27.0%	27.6%	2.2%
CPS Supervisors	7.9%	9.2%	7.1%	12.3%	11.9%	-3.9%
CPS Program	16.1%	18.4%	19.8%	26.6%	25.5%	-4.3%
CPS CVS Caseworker	17.1%	24.7%	24.6%	34.9%	34.7%	-0.6%
CPS CVS Supervisor	7.7%	10.2%	5.7%	13.4%	11.8%	-11.8%
CPS CVS Program	16.6%	23.1%	23.5%	34.3%	33.3%	-2.7%
CPS FAD Caseworker	11.3%	5.9%	13.8%	13.2%	23.1%	75.3%
CPS FAD Supervisor	3.8%	4.2%	4.4%	10.8%	0.0%	-10.8%
CPS FAD Program	10.5%	5.9%	13.2%	14.5%	20.2%	39.1%
CPS FBSS Caseworker	23.3%	18.6%	21.3%	17.7%	21.0%	18.4%
CPS FBSS Supervisor	9.1%	7.1%	8.3%	9.7%	13.1%	34.9%

Functional Title	Turnover Rate FY 2019	Turnover Rate FY 2020	Turnover Rate FY 2021	Turnover Rate FY 2022	Turnover Rate FY 2023 Year-To-Date	Percentage Change FY 2022 to FY 2023 Year-To-Date
CPS FBSS Program	20.8%	16.1%	20.7%	20.3%	21.2%	4.0%
CPS KIN Caseworker	4.4%	14.6%	9.3%	20.0%	15.2%	-23.9%
CPS KIN Supervisor	8.2%	8.0%	0.0%	12.4%	17.0%	37.6%
CPS KIN Program	7.0%	14.0%	9.0%	21.0%	16.6%	-20.7%
CPS OTH Caseworker	7.6%	9.0%	6.6%	11.2%	9.8%	-12.4%
CPS OTH Supervisor	3.8%	11.9%	19.8%	15.4%	7.7%	-50.0%
CPS OTH Program	10.6%	9.4%	10.4%	14.1%	10.4%	-26.3%
CPS SI Investigator	13.2%	8.0%	17.1%	19.3%	20.5%	6.4%
CPI Workers			40.8%	43.2%	38.2%	-11.7%
CPI Workers (Non-SI)	31.9%	28.8%	43.2%	45.7%	40.1%	-12.2%
CPI Supervisors	8.5%	10.3%	14.6%	14.9%	12.0%	-19.7%
CPI Program	25.1%	22.3%	34.9%	37.7%	34.1%	-9.6%
DCI Workers	24.8%	18.2%	48.9%	45.4%	42.1%	-7.2%
DCI Supervisors	16.7%	17.4%	50.0%	17.4%	40.0%	130.0%
DCI Program	19.0%	20.3%	36.4%	40.3%	37.5%	-6.9%
RCI Workers	29.8%	28.8%	26.4%	35.9%	25.5%	-29.1%
RCI Supervisors	10.3%	0.0%	14.8%	27.4%	11.1%	-59.4%
RCI Program	24.7%	21.6%	26.3%	33.0%	22.2%	-32.7%

Turnover is calculated using a method that mirrors the process by the Texas State Auditor's Office. Specifically: Total number of Terminations of Regular Employees/Count of Average Active Regular Employees.

## Strategy 2.1a: Continue efforts to recruit and retain quality workforce in CPS and CPI

**Rationale:** DFPS requires a competent, detailed, professional, and stable workforce to achieve the outcomes the agency desires for the children and families served. Improved recruitment and hiring practices enable the agency to design options which may ultimately contribute to increased retention of staff. Staff retention leads to quality casework that in turn promotes positive outcomes for clients. Tenured staff are more efficient and effective due to the complex nature of the work performed by DFPS. Developing skills and knowledge base takes time and experience. DFPS has an opportunity to provide superior services by attracting and retaining the highest quality staff possible.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Maintain and update when needed an internet presence with job postings.	Ongoing	In fiscal year 2023, DFPS continues to provide an internet job resource. By clicking on the "Jobs" link from <a href="http://www.dfps.state.tx.us/Jobs/default.asp">http://www.dfps.state.tx.us/Jobs/default.asp</a> , Users are taken to the "Come Work for Us" page that includes realistic job preview videos for HHSC Child Care Licensing, HHSC Residential Child Care Licensing, CPI, and CPS positions, as well as written realistic job previews for all programs. CPS also has a self-screening test that helps applicants decide if CPS is the right fit for them prior to applying. DFPS continues to post positions through Texas Workforce Commission, LinkedIn, Handshake, and Indeed. Also, low applicant pool and high vacancy positions are posted on social media platforms such as Twitter, Facebook, Indeed, and LinkedIn.
b. Use pre- employment written test.	Ongoing	TAG currently answers process questions, monitors screening services, and secures bilingual testing. Employment selection instruments help identify the most qualified applicants based on child welfare research and predictive validation studies from previous years. Tools include: 1) a written statement of interest that allows the candidate to express their passion for child welfare work. DFPS added stage-specific interview questions in hopes of identifying a potential employee's match for a specific type of CPI or CPS worker position.
c. Focus on hiring candidates with targeted degrees (e.g., social work, counseling, early childhood education,	Ongoing	In fiscal year 2023, DFPS continued recruitment efforts to identify candidates with a variety of educational and work/life experiences to determine the most qualified applicants for the agency, while continuing to give appropriate priority to individuals who hold a bachelor's degree or advanced degree in at least one of the following academic areas: social work; counseling; early childhood education; psychology; criminal justice; elementary or secondary education; sociology; and human services.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
psychology, criminal justice, elementary or secondary education, sociology, and human services).		
d. Increase starting pay for social work graduates.	Ongoing	DFPS provides an increased starting salary (3.4 percent or 6.8 percent) to social work graduates hired into Adult Protective Services and Statewide Intake caseworker positions. CPI and CPS also provided a 6.8 percent increase to newly hired caseworkers holding a graduate degree in social work.
e. Increase starting pay for bilingual hire.	Ongoing	DFPS provides an increased starting salary (6.8 percent) for bilingual staff in certain regional areas. The agency also continued efforts to recruit bilingual workers by using consistent testing for bilingual skills and posting positions specifically for bilingual applicants.
f. Offer 6.8 percent above base in certain approved locations.	Ongoing	DFPS continues to provide 6.8 percent above base in certain approved locations for jobs with low applicant pools and high vacancy rates.
g. Organize hiring fairs in specific locations to interview many staff in one or two days.	Ongoing	DFPS continues to organize hiring events in targeted areas based on vacancies. Centralized hiring events allow multiple hiring staff and program managers to interview a higher number of applicants in one or two days. DFPS continued to provide the following focused recruitment activities for jobs with low applicant pools and high vacancy rates.
d. Increase starting pay for social work graduates.	Ongoing	DFPS provides an increased starting salary (3.4 percent or 6.8 percent) to social work graduates hired into Adult Protective Services and Statewide Intake caseworker positions. CPI and CPS also provided a 6.8 percent increase to newly hired caseworkers holding a graduate degree in social work.
e. Increase starting pay for bilingual hire.	Ongoing	DFPS provides an increased starting salary (6.8 percent) for bilingual staff in certain regional areas. The agency also continued efforts to recruit bilingual workers by using consistent testing for bilingual skills and posting positions specifically for bilingual applicants.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
f. Offer 6.8 percent above base in certain approved locations.	Ongoing	DFPS continues to provide 6.8 percent above base in certain approved locations for jobs with low applicant pools and high vacancy rates.
g. Organize hiring fairs in specific locations to interview many staff in one or two days.	Ongoing	DFPS continues to organize hiring events in targeted areas based on vacancies. Centralized hiring events allow multiple hiring staff and program managers to interview a higher number of applicants in one or two days. DFPS continued to provide the following focused recruitment activities for jobs with low applicant pools and high vacancy rates.
h. Post jobs on job search websites or newspapers that target needed professionals.	Ongoing	<p>When certain criteria exist for any single job the agency will take special measures to ensure positions are filled timely and with staff that will stay. Criteria include low applicant pool, low quality applicant pool, or high number of vacancies. If criteria are met, DFPS can use the following solutions:</p> <ul style="list-style-type: none"> <li>• Organize hiring fairs to interview a large number of applicants by coordinating with multiple supervisors to interview for their vacancies simultaneously;</li> </ul> <p>Partner with the DFPS Communications division to produce special interest stories;</p> <ul style="list-style-type: none"> <li>• Work with partners, Northgate Arinso, DFPS human resources staff, and the DFPS background check unit, to expedite all phases of the hiring process;</li> </ul> <p>Increase human resources specialist for targeted areas, when necessary;</p> <p>Work with contracted partners to expedite certain hiring activities;</p> <ul style="list-style-type: none"> <li>• Optimize LinkedIn features with: <ul style="list-style-type: none"> <li>▶ Contract for two recruiter seats and a hiring manager to quickly review candidates, leave notes on candidate’s profiles, and provide feedback to others so allows DFPS may input search criteria, get targeted results, and prioritize candidate;</li> <li>▶ Post up to four job postings at one time; and</li> </ul> </li> </ul> <p>Career page with traffic ads to showcase DFPS career options and attract applicants which drives LinkedIn members to follow the DFPS page with a single click on the ad, so they can quickly explore and apply to open jobs within DFPS; Career page with traffic ads – This allows DFPS to showcase our culture and careers and to attract applicants. It will provide candidates personalized job recommendations, so they can quickly explore and apply to open jobs within DFPS. Traffic ads will showcase our agency and drive LinkedIn members to follow the DFPS page with a single click on the ad; and</p> <p>Post 20 job requisitions a month via social media.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<ul style="list-style-type: none"> <li>▶ Facebook, LinkedIn, Twitter;</li> <li>▶ Participate in statewide hiring fairs with same day interviews;</li> <li>▶ Optimize Indeed features: <ul style="list-style-type: none"> <li>◇ Free job postings which allow for screening for qualified applicants;</li> <li>◇ High visibility of job postings with monthly visitor traffic totaling more than 300 million; and</li> <li>◇ Indeed, posting requirement for DFPS HR Specialists; and</li> </ul> </li> <li>□ Utilize the Handshake network (<a href="http://www.joinhandshake.com">www.joinhandshake.com</a>): <ul style="list-style-type: none"> <li>◇ Network includes more than 9 million active student users, 1,400 college and university partners, and 650,000 employers;</li> <li>◇ Employers can post jobs and share with specifically targeted colleges and universities;</li> <li>◇ Students and alumni can search jobs and submit resumes;</li> <li>◇ Messaging system allows employers and applicants to directly communicate with each other; and</li> <li>◇ DFPS HR Specialists are required to post on Handshake.</li> </ul> </li> </ul>
i. Request positions in certain locations be posted as a "hot job" in database of the DFPS personnel and job application system.	Ongoing	DFPS continues to identify certain positions to be posted as a "hot job" in the Centralized Accounting and Payroll/Personnel System (CAPPS).
j. Evaluate existing retention strategies and expand proven effective retention strategies across the agency. Implement statewide performance recognition campaign.	Ongoing	<p>DFPS continues to provide the following focused retention activities for jobs with high turnover, caseloads, and vacancy rates:</p> <ul style="list-style-type: none"> <li>● Bring program and division teams together to help with workload in specific areas;</li> <li>● Pay a percentage of earned overtime for certain staff;</li> <li>● Add caseworker staff as the budget and full-time equivalent cap permit to reduce caseloads;</li> <li>● Continue paying CPS and CPI workers a mentor stipend when they mentor new hires through their first few months of employment;</li> <li>● Continue to provide programmatically focused skills training programs that ensure</li> </ul>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		<p>caseworkers are prepared to perform all their assigned tasks; and</p> <ul style="list-style-type: none"> <li>Meet with regional leadership and staff to discuss retention efforts; form workgroups across the state to ensure staff get needed resources and support; conduct regularly scheduled regional events with leadership to recognize exceptional staff.</li> </ul>
k. Maintain regional and statewide supervisor and caseworker advisory committees.	Ongoing	CPS continues to maintain regional and statewide caseworker and supervisor advisory and leadership committees. The statewide committees meet monthly, led by the CPS associate commissioner and director of field. CPI continues to hold monthly calls with supervisors across the state as well as quarterly in-person meetings to discuss the needs of staff and management in each region. CPI also maintains regional and statewide caseworker and supervisor advisory and leadership committees which are held monthly and led by state office leadership.
l. Recognize exemplary work through regional and state awards.	Ongoing	DFPS continues to recognize new employees' tenure during each of their first four years with the agency by providing tenure certificates., as well as the Commissioner's Employee Recognition Ceremony and other employee recognition awards. Regional directors regularly award Regional Exemplary awards to staff across the state.
m. Provide merit raises as funding is available.	Ongoing	DFPS staff who performed exemplary work are awarded merits, when funding is available.
n. Provide enhanced training for supervisors and program directors to improve quality of leadership and support.	Ongoing	DFPS continues to offer staff training that provides an integrated, competency-based training curriculum framework that supports a continuum of learning and skill development from beginner to advanced management levels. CPI and CPS continue to provide conferences and trainings to supervisors, program directors, and above to enhance their skills on leadership, support, accountability, and practice.
o. Provide regional management workforce reports to view trends, vacancies, and assist with retention.	Ongoing	In order to monitor the status of vacancies, TAG provided regional management weekly hiring reports that show all vacant positions and the stage of hiring for each position. These reports allow regional management to monitor the status of hiring and make decisions related to ongoing coverage or needed assistance in the areas with vacancies. TAG also provides regional management with a monthly report that reflects separation rates at the regional level as well as the units within the region with the highest separation rate for the last six months. This allows management to delve into any potential concerns impacting retention in that unit via an intervention staffing. Regional management and the TAG hiring managers meet monthly to discuss priority hiring areas, barriers to filling positions (such as

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		low applicant pools), and work through any additional challenges to timely hiring.

**Objective 2.2: Train new hires, employees, supervisors, and management (CFSR PIP Goal 6) – Melissa Hobbs**

**Rationale:** To enhance the quality of training provided to newly hired CPS caseworkers, the agency will continue to evaluate and enhance the CPS professional development training program. To ensure the quality of training provided to newly hired CPS managers (i.e., supervisors and program directors), DFPS will continue to evaluate and enhance the training program.

**Expected Outcomes**

- Well-trained workforce will result in improved casework practice, services, and outcomes for children and families;
- Improved caseworker practice and competency leading to improved child safety, permanency, and well-being outcomes; and
- Supervisors that are well trained and developed in both practice and leadership will result in improved staff retention and a highly skilled workforce.

**Outcome Measures**

- Ongoing evaluation of new worker training through in person training observations, analysis of timely case assignability and protégé evaluations;
- Ongoing evaluation of mentor support through mentor support groups, check in calls throughout mentor and protégé pairings, and regional mentor capacity;
- Ongoing evaluation of supervisor and program director training through in-person training observations and supervisor and program director evaluations; and
- Evaluate and design leadership conference to address needs in leadership based on evaluations from conference.

Interim Benchmark/Milestone	Target Completion
Conduct focus groups with former protégées, mentors, supervisors, and CLOE staff and provide summary to identified stakeholders.	Ongoing

Interim Benchmark/Milestone	Target Completion
Enhance CPS professional development training and certification tracks.	Ongoing
Enhance mentor support based on feedback.	Ongoing
Continue to monitor program director trainings.	Ongoing
Conduct leadership conference for program directors.	Ongoing
Provide continuous learning opportunities for program directors.	Ongoing

### Summary

CPS and CPI continuously collaborate with the CLOE to focus on increasing the quality of training for newly hired CPS and CPI caseworkers. Developing a quality workforce is essential to increase retention, maintain program quality, uphold ethical standards, and improve services and outcomes for children and families.

A 2018 evaluation of the CPS professional development model, completed by the University of Texas found the CPS professional development model improved the extent to which caseworkers have a realistic understanding of their responsibilities during their first 18 months of employment. Supervisors and caseworkers also report that the CPS professional development model is effective in preparing new caseworkers for their job responsibilities. Focus groups held in 2019 with former protégées, mentors, supervisors, and CLOE staff provided input and suggestions to improve the quality of the CPS and CPI professional development program as well as the CPS and CPI Mentoring Initiative. As a result of these recommendations, the CPS and CPI professional development models were enhanced to include updates to all critical areas; the new models were released in 2021 and are currently in review for potential updates in fiscal year 2024.

The CPS and CPI Mentoring Initiative is a valuable part of training new caseworkers. Notably, the full development of newly hired caseworkers does not rest solely on mentors. However, mentors and positive mentoring relationships are essential to creating a fully engaged and competent workforce within CPI and CPS. To help ensure the CPS and CPI Mentoring Initiative was meeting intended goals, DFPS Internal Audit conducted an audit in fiscal year 2020 for the following:

1. Evaluate the efficiency and effectiveness of CPS and CPI Mentoring Initiative processes to determine whether processes are consistently performed and working as intended to meet program requirements.
2. Determine whether CPS/CPI mentor stipend is paid in accordance with requirements.

As a result of the audit, CPS and CPI with CLOE completed the following:

1. **Enhance the *CPS Mentor Handbook*** – This was accomplished in fiscal year 2022, resulting in a clear and concise description of the CPS Mentoring Initiative, roles, and responsibilities of all involved, and a comprehensive guide to completing CPS professional development training through case assignability. Furthermore, forms associated with the CPS Mentoring Initiative were updated and a CPS Mentoring Initiative Safety Net page was developed to house all associated material to aid mentors and supervisors in accessing all CPS Mentor Program related material throughout the process. Updates to all processes and documentation were communicated through regional meetings across the state, to ensure staff are aware of the updates and are able to access all applicable information. Additional revisions will be made when need arises.
2. **Review and revise mentor related trainings** –The CPS Mentor Orientation training analysis and revision was completed in fiscal year 2021 and made into a computer-based training. *Teaching and Feedback Training*, and in person comprehensive look of the responsibilities of a mentor, is currently under review for a complete enhancement; expected completion is Spring fiscal year 2024. This training is required within three months of initial pairing with a protégé. Additional revisions will be made when appropriate.
3. **Create, procure, and provide information for additional trainings to increase the mentor skills and leadership abilities and provide additional tools for success** – *Effective Communication for Conflict Resolution* training was released, in response of field requests to address barriers to staff development when conflict prevents successful engagement. Mentors are required to complete this training within 12 months of becoming certified and provided with registration information and encouraged to attend PAX Tools training, offered by Paxis and HHSC. PAX Tools is a collection of evidence-based, trauma-informed, culturally responsible strategies to improve cooperation and self-regulation with youth. These strategies have been shown to improve education and mental health outcomes and result in less substance use. Mentors have also been encouraged with information on how to earn a social work certificate from the Steve Hicks School of Social Work at The University of Texas at Austin which features in person and asynchronous learning opportunities for child welfare and CPS that address the root causes of barriers that prevent timely and positive permanency and wellbeing outcomes for children. Additional trainings will be developed and evaluated for consideration.
4. **Implement a mentor recognition program and provide additional supports to staff in these leadership roles** – In fiscal year 2021, the CPS Mentoring Initiative began consulting with mentors statewide, to determine how they would like to be recognized for their contributions to the growth and development of new staff. As a result of the feedback received, CPS mentor leads were selected within each region and stage of service area to highlight select excellent mentors and to increase support to new mentors. CPS mentor leads were financed to attend the Crimes Against Children Conference, headed by the Dallas Children’s Advocacy Center in fiscal year 2022, to recognize this achievement. New leads are being identified currently and will continue to be a part of the CPS Mentoring Initiative moving forward, with selections

being updated annually. Additionally, Mentor Program Specialists held mentor recognition events in each region during fiscal years 2022 and 2023 to award and publicly highlight their contributions to the training of new staff. Mentor lanyards were purchased and given to all current mentors in each region, to quickly identify their designation to other staff and thank you notes are sent to mentors as they complete a cohort pairing with a protégé CPS Mentor Support Groups were initiated in fiscal year 2022 and will continue as opportunities to share information and training opportunities with mentors in each region; these are facilitated by the CPS mentor program specialist. Feedback and recommendations for additional edits are welcome and considered on an ongoing basis.

CPS and CPI continue to provide conferences, workshops, and trainings to develop their middle and executive manager leadership skills. To date, more than 500 CPS and CPI leaders have completed The Leadership Challenge™ experience. This is a two-day, in person leadership workshop, based on the five practices of exemplary leaders. In this training, leaders are provided a *Leadership Practices Inventory™ (LPI-360)*, which measures the frequency leaders engage in the exemplary behaviors of leadership. Leaders also receive individual coaching to identify areas of strengths and opportunities to improve leadership abilities. In fiscal years 2021 and 2022, sessions of The Leadership Challenge™ have been offered to CPS and CPI staff on a quarterly basis, to all incoming Program Directors and above. In fiscal years 2022 and 2023, this has expanded to DFPS State Office leadership staff and other divisional areas. As a result of Beta testing, The Leadership Challenge Self-Empowered™ training was released in late fiscal year 2021, and this curriculum was purchased for roll out for all CPS Supervisors statewide. This training includes a self-assessment of the Leadership Practices Inventory, and this one-day training will be offered to all supervisors within fiscal years 2023 and 2024. This will allow ongoing training opportunities to support professional development and build positional and divisional partnerships among these leaders.

In fiscal year 2022, the prior supervisor basic skills development course was discontinued and replaced with *Foundations of CPI and CPS Supervision* and *Ask a Subject Matter Expert*. These trainings were developed in accordance with input from the Statewide Training Council, comprised of regional and state office staff at all positional levels. Evaluation of the new trainings have been positive, and they report feeling more prepared to take on their new leadership role.

In Fall 2021, the University of Texas at Austin began providing a workshop for supervisors, focused on the book, *Dare to Lead*, by author, Brené Brown. This workshop discusses courage in the face of adversity and leading through change and the roll out was focused in Region 06 as a pilot. In fiscal year 2023, this offering is expanded into Regions 02 and 11 and continuing in Region 06 to support brave leadership.

The CPS and CPI Leadership Book Club has continued to be offered to cohorts in supervisor and program director roles and are facilitated by the CPI and CPS division administrators and training liaisons. Throughout the course of six months,

participating staff read through and discuss six leadership books in an effort to promote ongoing growth and development and to encourage collaboration across divisional, regional and stage of service lines.

In August 2022, CPS leadership from around the state gathered for the *CPS Leadership Retreat: Inspiring Resilience Through Vision and Leadership*. The COVID-19 pandemic limited opportunity to spend time together, so this conference was focused on resiliency and rebuilding our team, after the years of social-distancing and social isolation. During the conference, leaders were presented with knowledge, tools, and techniques to inspire resilience within their own teams, which is aligned with the five practices of exemplary leadership and had the opportunity to craft a vision specific to their own program area. The 2023 Leadership Retreat is scheduled for August 22-24, 2023, in Denton and has been expanded to include leadership staff from the SSCCs to join CPS program directors and above. The conference will be titled *Creating Cultural Change Through Connection and Collaboration* with the intent to build engagement and connection between leadership across the state. The goal is to look outside our agencies for creative and innovative ideas and opportunities for collaboration through experiential activities and workshops.

**Strategy 2.2a Lead: Melissa Hobbs**

**Strategy 2.2a: Evaluate and enhance the quality of training provided to newly hired CPS and CPI caseworkers. (Evaluation)**

**Rationale:** The quality of training provided to newly hired caseworkers creates a well-trained and skilled workforce leading to improved child safety, permanency, and outcomes for children and families. It has a direct impact on retention.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Review caseworker new hire training and amend areas that require an update to ensure well-trained and skilled workforce.	Ongoing	<p>CPS professional development training was enhanced in June 2021 and is currently under review for updates. In person trainings have been observed and data is collected and reviewed pertaining to protégé evaluation of their mentor throughout the training model, as well as timely case assignability. Certification tracks are reviewed yearly and updated as trainings are identified that would better support quality casework.</p> <p>The CPS Mentoring Initiative has experienced a complete overhaul. CPS mentors support new staff through modeling and explaining stage specific job responsibilities and providing a realistic understanding of their roles and expectations in each position. Mentors were</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
		provided with new and innovative training opportunities. The effectiveness of the mentor relationship is analyzed through protégé evaluation, check in calls throughout mentor and protégé pairing, and timely case assignability. A new tracking system was implemented in fiscal year 2023 to ensure data is effectively stored and to more easily reconcile mentor stipend pay with associated reporting measures. Mentor Support Groups and recognition events have occurred throughout this past fiscal year and will be ongoing.
b. CPI and CPS will hire a division administrator for training support to be each division's single point responsible for enhancing quality facilitation and providing feedback on trainings offered to the field.	December 2020	CPS and CPI have accomplished this goal.

**Strategy 2.2b Lead: Melissa Hobbs**

**Strategy 2.2b: Evaluate and enhance the quality of training provided to new CPS/CPI supervisors and above (Evaluation).**

**Rationale:** Professional development of supervisors and above is critical for supporting the agency's mission and staff development and retention, which improves services to children and families served.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Conduct and analyze focus groups with CLOE, CPS, and CPI supervisors and managers to assess	Ongoing	Evaluation of all supervisor training and its effectiveness are ongoing, and trainings will be modified as need is identified.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
what practice is working well, what needs strengthening, and ways to modify training.		
b. Use results of the focus groups to review and update the CPS and CPI supervisor training.	Ongoing	Supervisor basic skills development was completely enhanced and roll out of the new training, <i>CPI and CPI Foundations of Supervision</i> , occurred in December 2021. The modifications included additions in all areas with an expanded legal section and data analysis section being the largest adjustment. Except for the foundational training mentioned above, all other supervisor certification trainings were analyzed and found to meet program needs. Ongoing review of all supervisor trainings will continue to occur, and modifications will be made when appropriate.

**Strategy 2.2c Lead: Melissa Hobbs**

**Strategy 2.2c: Provide additional leadership training to CPS and CPI supervisors and above (Training).**

**Rationale:** Leadership development of supervisors and above is critical for supporting the agency’s mission and staff development and retention, which improves services to children and families served.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Develop and implement a Leadership Program for CPI and CPS supervisors.	Ongoing	<p>In fiscal year 2023, <i>Dare to Lead</i> training was expanded into Regions 02 and 11, with continued offerings in Region 06. Other areas of the state will be offered this University of Texas training opportunity on an ongoing basis, as available. <i>Self-Empowered</i>, a new one-day Leadership Challenge™ training is offered to CPS supervisors beginning in fiscal year 2023 and will be ongoing.</p> <p>Since fiscal year 2021, the CPS and CPI Leadership Book Club for Supervisors has continued with supervisor participation twice monthly in meetings over the course of six months. Six leadership books are read and discussed during each cohort. This allows for creative engineering across stages of service, divisional lines, and regional areas and is</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
resulting in the building of professional colleague relationships and knowledge growth.		
b. Provide annual statewide conferences for CPI and CPS program directors as an opportunity to strengthen the level of management and provide opportunities for development, best practice sharing, and training.	Ongoing	CPS and CPI yearly provides leadership development opportunities for program director level staff and above on an annual basis through leadership conferences. These conferences consist of opportunities to learn about leadership practices, policy, and best practices. The CPS leadership conference was held in August 2022 and plans are underway for the 2023 leadership retreat in Denton on August 22-24, 2023.
c. Provide leadership development opportunities to staff who are program directors and above.	Ongoing	<p>CPS and CPI are currently focusing on developing training for program directors. With the assistance of CLOE, the Statewide Training Council, and several Texas universities, DFPS address areas of growth management, courage in the face of adversity, hiring practices and human resource policy and protocol, etc. Final products will be ready for roll out in mid-to late-fiscal year 2023.</p> <p>CPS and CPI program directors have been trained on The Leadership Challenge and this training is offered quarterly with all program director staff and above, as new staff are promoted into these positions. In September 2020, CPS and CPI division administrators began a Leadership Book Club, open to program directors, and covers a wide variety of leadership and communication focused subjects. This training is ongoing, with participants across the state and is six months in length. CPS and CPI staff are continuing to promote and facilitate the Leadership Book Club with program directors and will continue to offer this opportunity as interest remains. This allows for creative engineering across stages of service, divisional lines, and regional areas and is resulting in the building of professional colleague relationships and knowledge growth.</p>

**Goal 3: Provide equitable and trauma-informed services (CFSR PIP Goal 6)**

**Rationale:** Children and youth entering the child welfare system have experienced trauma and may continue to experience trauma as the agency works to secure their safety, permanency, and well-being. Building a trauma-informed and trauma-responsive culture through training, services, and collaboration with social service agencies and organizations will allow DFPS to better serve the children and families engaged in the child welfare system.

A trauma-informed child welfare system must also be culturally competent and equitable to the diverse populations it serves. By enhancing the cultural competency of staff and stakeholders in the Texas child welfare system, the system can appropriately meet the individual needs of diverse populations and improve outcomes. DFPS is committed to eliminating the disproportionality and disparities in the Texas child welfare system. With multiple efforts underway to keep families intact, the combined efforts will result in strategies to eliminate disparities.

**Goal 3 relates to CFSR PIP cross-cutting issues 1, 4, and 6.**

**Objective 3.1: Embed trauma-informed, equity-based knowledge into best practices – Jennifer Nichols**

**Rationale:** By enhancing the competency of staff and stakeholders in the Texas child welfare system, the system can appropriately meet the individual needs of diverse populations and improve outcomes with trauma-informed and equity-based best practices. To significantly improve the outcomes for children and families, DFPS needs to embed knowledge and skills into casework practice.

#### **Expected Outcomes**

- Enhanced knowledge and competency in trauma-informed and race equity concepts among staff and stakeholders; and
- Increased casework practices supporting positive outcomes for children and families and demonstrating an integrated knowledge of trauma-informed and equity concepts.

#### **Outcome Measures**

- Staff training evaluation data showing increased knowledge in trauma-informed and subject matters.

Interim Benchmark/Milestone	Target Completion
Develop training curriculum for CPS and CPI staff on working with a trauma lens.	Completed
Review and complete as-needed updates of CPS, CPI, and CLOE required and available trainings on trauma-informed subject matters.	Annually
Review and completed as-needed updates of CPS and CPI policies and practices using a trauma-informed approach.	Ongoing
Develop an agency campaign regarding the impact of secondary trauma and staff support.	Completed
Develop support and training materials on trauma-informed care practices for kinship caregivers.	Ongoing
Develop training curriculum for CPS and CPI staff on working with a trauma lens.	Completed

### Summary

The trauma-informed care manager and specialist positions are within the CPS Behavioral Health Services division where there continues to be an emphasis on strengthening and enhancing the trauma-informed child welfare system, in order to best serve children and families. DFPS continues to participate in community workgroups including the Cross Systems Trauma-Informed Care, Children’s Commission Statewide Collaborative on Trauma-Informed Care Implementation Task Force and its three subgroups – policy and practice; training, info sharing, data; and funding – as well as the System of Care Workgroup. New training on trauma-informed care for newly hired field staff and on-going training to tenured staff who are pursuing a promotion was implemented. The new definitions for ‘trauma’ and ‘trauma-informed care’ were officially adopted into the Texas Administrative Code. The Trauma-Informed Care team is providing direct support to kinship caregivers and staff who support kinship caregivers by providing education and awareness regarding trauma-informed care principles and practices.

### **Strategy 3.1a Lead: Jennifer Nichols**

**Strategy 3.1a: Enhance trauma-informed care and practice to help effectively minimize the impact of trauma for children, caregivers, and staff.**

**Rationale:** By enhancing the competency of staff and stakeholders in the Texas child welfare system, the system can appropriately meet the individual needs of diverse populations and improve outcomes with trauma-informed and equity-

based best practices. To significantly improve the outcomes for children and families, DFPS needs to embed knowledge and skills into casework practice.

DFPS has a strong collaborative relationship with the Texas Children's Commission which leads stakeholders in the Statewide Collaborative on Trauma-informed Care, an ongoing task force created for the purpose of implementing its blueprint, *Building a Trauma-Informed Child Welfare System*.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
<p>a. DFPS will continue to serve on Statewide Collaborative on Trauma- Informed Care and its workgroups to fulfill implementation of the blueprint for a Trauma-Informed Child Welfare System.</p>	<p>Fall 2019 and ongoing thereafter</p>	<p>DFPS continues to serve on the following workgroups:</p> <ul style="list-style-type: none"> <li>• Regional Kinship Collaboration Groups;</li> <li>• South Texas Regional Advisory Committee;</li> <li>• Children’s Commission State Collaborative on Trauma-Informed Care Implementation Task Force and policy and practice, training, info sharing, data, and funding subgroups;</li> <li>• System of Care Workgroup;</li> <li>• South Texas Trauma-Informed Care Consortium: Family Support Services; and</li> <li>• Child Welfare/Foster Care workgroups.</li> </ul> <p>The South Texas Trauma-Informed Care Consortium is a collaboration between The Children’s Shelter, Voices for Children, and City of San Antonio Metro Health Department. The consortium brings together community participants who are committed to addressing the impact of trauma. The Consortium’s goals are to:</p> <p>Educate the community about trauma, about the damage of trauma and re-traumatization, and the prevalence of trauma-related damage;</p> <ul style="list-style-type: none"> <li>• Raise awareness of the importance of being trauma-informed;</li> <li>• Build a resilient community and mitigate the effects of trauma-related damage.</li> </ul> <p>The Blueprint has been completed and published.</p>
<p>b. DFPS will lead a Secondary Trauma Support workgroup to focus on agency efforts</p>	<p>October 2020</p>	<p>The Secondary Trauma Support Group Project was discontinued due to difficulties that arose during the COVID-19 pandemic, as well as staff changes at the partner university.</p>

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
specific to staff.		
c. Through DFPS rulemaking, define “trauma” and “trauma-informed” in the Texas Administrative Code.	December 2020	In conjunction with the Statewide Collaborative on Trauma- Informed Care’s Policy and Practice Workgroup, updated definitions for ‘trauma’ and ‘trauma-informed’ were officially adopted into the Texas Administrative Code in February 2021.
d. DFPS will expand trauma-informed care training provided in CLOE Professional Development by utilizing the full National Child Traumatic Stress Network curriculum: The Child Welfare Trauma Toolkit 2.0.	December 2020	DFPS released an updated trauma-informed care training for all newly hired staff in October 2019. Both English and Spanish versions were made available. The Trauma-Informed Care team continues to collaborate with CLOE as needed to expand trauma-informed care training opportunities.

**Strategy 3.1b Lead: Jennifer Nichols**

**Strategy 3.1b: To support practices and trainings in becoming more trauma informed.**

**Rationale:** By enhancing the competency of staff and stakeholders in the Texas child welfare system, the system can appropriately meet the individual needs of diverse populations and improve outcomes with trauma-informed and best practices. To significantly improve the outcomes for children and families, DFPS needs to embed knowledge and skills into casework practice.

DFPS has a strong collaborative relationship with the Texas Children's Commission which leads stakeholders in the Statewide Collaborative on Trauma- Informed Care Task Force for the purpose of implementing its blueprint, *Building a Trauma-Informed Child Welfare System*.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Review and complete as- needed updates of CPS, CPI, and CLOE required and available trainings on trauma-informed subject matters.	September 2020 and ongoing thereafter	DFPS continues to review trauma-informed care material for CPS, CPI, and CLOE and provide updates as needed. A Lunch and Learn quarterly series and monthly regional <i>Trauma-Informed Care 101</i> and Secondary Traumatic Stress trainings to DFPS field staff rolled out in April 2022.
b. Review and complete as- needed updates of CPS and CPI policies and practices using a trauma- informed approach.	September 2020 and ongoing thereafter	Definitions of trauma and trauma-informed recommended for adoption and steps for the rule-making process have been completed and are now utilized as such in policy and practice updates.

**Objective 3.2: Collaborate among social service agencies and organizations – Mosley (Moe) Hobson**

**Rationale:** DFPS engages with community partners to develop and implement programs and policies that help to reduce disproportionality in child welfare and ensure equity in child welfare services while enhancing a trauma-informed perspective and practice. Through engagement, affected communities are empowered in innovative ways to support individual and community efforts for inequities in the system and healing from trauma.

**Expected Outcomes**

- The community has a voice and a choice in actions and decisions that impact them so system changes may occur and be sustainable; and.
- Enhanced collaboration with systems and stakeholders who interact with DFPS children and families to increase trauma- and equity-informed practice and services.

### Outcome Measures

- Positive community feedback regarding fairness and accessibility efforts through dialogues, discussions, planning, and decision-making; and
- Positive stakeholder feedback regarding fairness and accessibility in external and internal workgroups, round tables, and other relevant activities.

Interim Benchmark/Milestone	Target Completion
Continued inclusion of the community in dialogues, discussions, planning, and decision-making of efforts regarding trauma-informed and equity-based practice.	Ongoing
Collaboration with external stakeholders through participation in external and internal workgroups, round tables, and other relevant activities promoting trauma-informed and equity-based practice.	Ongoing
DFPS participation in the Statewide Collaborative on Trauma-Informed Care implementation plan.	Ongoing

### Summary

*The Texas Model* is a framework for institutional and community transformation which has laid the foundation for expansion and continued system improvement by addressing and eliminating disparities across systems. *The Texas Model* is made up of best practices with proven outcomes, history, and lessons from work in child welfare, and a natural process that makes sense to community, managers, and workers. Two of the key components of the *Texas Model* are engaging communities and collaborating across systems.

DFPS strives to work across systems through its continued work communities and external stakeholders. Each of the action steps below are important to the accomplishment of this goal and support the outcome measures. In 2022, The DFPS Office for Addressing Disproportionality and Disparity (OADD) was reorganized under the Prevention and Community Well-Being Division in order to enhance community stakeholder engagement. As COVID-19 cases decline across Texas, more opportunities to create, reestablish, and strengthen existing relationships with internal and external stakeholders have presented itself in 2022. Positive feedback is evident in community and stakeholders consistently seeking the participation and technical assistance of the OADD staff.

### **Strategy 3.2a Lead: Mosley (Moe) Hobson**

**Strategy 3.2a: Enhance networks and coalitions of gatekeepers and advocates to seek sustainable solutions across institutional lines.**

**Rationale:** DFPS engages with community partners to develop and implement programs and policies that help to reduce disproportionality in child welfare and ensure equity in child welfare services while enhancing a trauma-informed perspective and practice. Through engagement, affected communities are empowered in innovative ways to support individual and community efforts for inequities in the system and healing from trauma.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Enhance inclusion of the community in dialogues, discussions, planning, training, and decision-making efforts regarding trauma-informed and equity-based practice.	Fall 2019 and ongoing thereafter	<ul style="list-style-type: none"> <li>• DFPS OADD staff presented at numerous conferences, including the PEI Conference and Texas Bar CLE.</li> <li>• DFPS OADD partners with the Advisory Committee on Promoting Adoption of Minority Children. The committee members are appointed by the DFPS Commissioner and is comprised of faith-based and community leaders with representatives from across Texas. The committee established legislatively in 1997 to advise CPS on policies and practices that affect services for minority children and their families and works with CPS, churches, and the community to raise awareness and increase resources for all CPS stages of service from prevention to permanency.</li> <li>• DFPS OADD staff facilitated several trainings around Courageous Conversations in Child Welfare, Cultural Humility, and Anti-Bias training with Family and Youth Success Grantees, Boys and Girls Club of Central Texas, CASA, Lubbock Independent School System, Motivation, Education, and Training, and DFPS Office of General Council.</li> </ul>
b. OADD will participate in Travis County Child Welfare Race Equity Collaborative as a member of the core decision-making team.	Fall 2019 and ongoing thereafter	OADD team actively participated and provided subject matter expert support to The Travis County Child Welfare Race Equity Collaborative (CWREC) and Dallas County Committee for Addressing Disproportionality and Disparities.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
b. OADD will participate in Travis County Child Welfare Race Equity Collaborative as a member of the core decision-making team.	Fall 2019 and ongoing thereafter	OADD team actively participated and provided SME support to The Travis County Child Welfare Race Equity Collaborative and Dallas County Committee for Addressing Disproportionality and Disparities.
c. Collaboration with external stakeholders through participation in external and internal workgroups, round tables, and other relevant activities promoting trauma-informed and equity-based practice.	Fall 2019 and ongoing thereafter	<p>OADD:</p> <ul style="list-style-type: none"> <li>• Sits on the Texas Children’s Commission Collaborative Council and participates in several subcommittees;</li> <li>• Provides data during the Advisory Committee for Promoting the Adoption or Minority Children Meetings;</li> <li>• Presented a session at Prevention and Early Intervention Division’s Partners in Prevention Conference in September 2022;</li> </ul> <p>Attended the Collective Impact Child Welfare virtual equity convening conference in December 2022;</p> <p>Participated in the Dallas County Disproportionality Committee Meeting in September 2022; and</p> <p>Presented at Dallas County’s Race Equity Conference and participated in a community resource fair in one of the counties highest underserved population in March and April 2023;</p> <p>The DFPS disproportionality manager:</p> <ul style="list-style-type: none"> <li>• Provides continuous technical assistance to PEI and its grantees on cultural humility and addressing bias in day-to-day practices;</li> <li>• Attended the Casey Family Programs’ in-person equity convening conference in October 2022;</li> <li>• Presented at the Hill Country CASA Ad Litem Symposium in February 2022; and</li> <li>• Co-presented at the Texas Law Conference in March 2022.</li> </ul>
d. DFPS disproportionality manager and selected	Fall 2019 and ongoing thereafter	OADD attended trauma informed care training and consulted with the DFPS trauma-informed care specialist.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
staff will participate in the Statewide Collaborative on Trauma-Informed Care Implementation Task Force.		
e. Engage and collaborate with three federally recognized tribes to enhance services to indigenous children and families. Agency and tribal representatives will meet a minimum of three times a year or at the request of the tribal representatives.	Fall 2019 and ongoing thereafter	OADD has ongoing e-mail communications, conversations, and collaborations with CPS Indian Child Welfare Act and tribal representatives. The OADD met with DFPS regional and Indian Child Welfare Act staff and tribal members in New Mexico.

**Objective 3.3: Reduce racial and ethnic disparities in the child welfare system – Mosley (Moe) Hobson**

**Rationale:** Disaggregated data reported by race and ethnicity allows the Texas child welfare system to understand the extent of disproportionality and disparities in outcomes and then develop targeted efforts to address them.

**Expected Outcomes**

- Outcomes for all families within the domains of safety, permanency, and well-being will improve.

**Outcome Measures**

- Rate of reunification among African American children and their families will increase;
- The removal rate gap among African Americans, Latinos, and Anglos will continue to close;
- Parity for families receiving Family group conferences and family team meetings services.

Interim Benchmark/Milestone	Target Completion
Annual data analysis reports related to disproportionality.	Ongoing
Analyze data at key decision-making points.	Ongoing
Train staff and community in anti-racist principles.	Ongoing

**Summary**

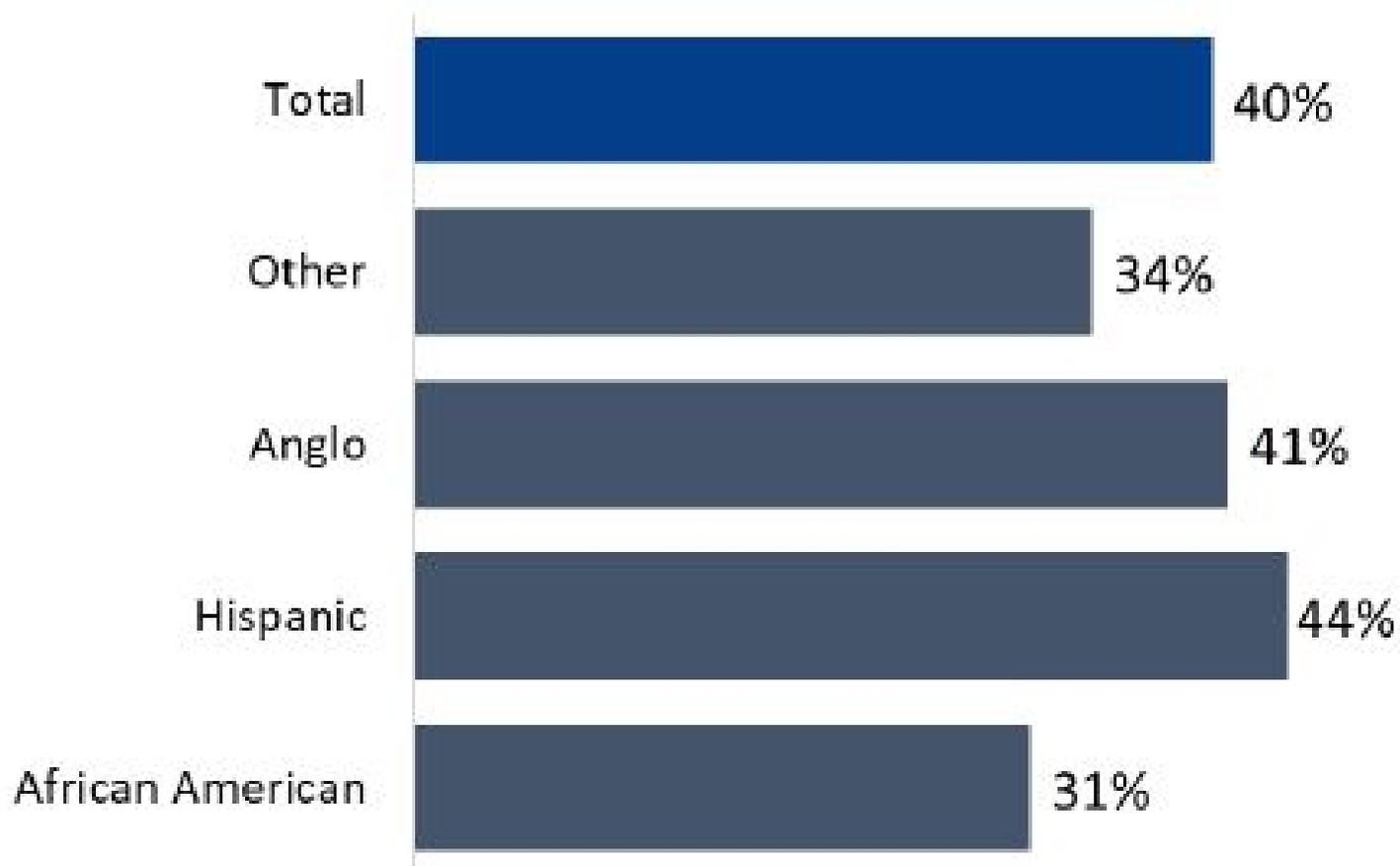
At the state level, African American children make up a larger proportion of children being reported by the community, and this trend remains through investigation and removals. A higher proportion of children in the “other” race/ethnicity category were reported as alleged victims at intake than in the statewide population. This may be because the “other” category includes when the race and ethnicity of the child are unknown, which is more likely to happen at the point of report. The proportion of children in the “other” race/ethnicity category who were investigated or removed was similar to the general population. Hispanic children made up a slightly smaller proportion than in the general population across the three DFPS service stages.

Statewide, the largest disparity was seen in African American children, who are 1.9 times more likely to be reported, 2.0 times more likely to be investigated, and 1.7 times more likely to be removed than Anglo children. The disparity between African American and Anglo children is slightly higher compared to last fiscal year. African American children are 0.2 times more likely than last fiscal year to be reported or removed compared to Anglo children.

Children of “other” races/ethnicities were 2.3 times more likely to be reported to Statewide Intake by the community but had a similar likelihood of being investigated or removed than Anglo children. Hispanic children had similar outcomes to Anglo children for each decision point.

Due to legislative changes implemented beginning in fiscal year 2022, there were fewer removals of children in fiscal year 2022 than in fiscal year 2021. The overall rate of decline in child removals was 40 percent between fiscal years 2021 and 2022, and the rate of decline was highest for Hispanic children (44 percent) and lowest for African American children (31 percent).

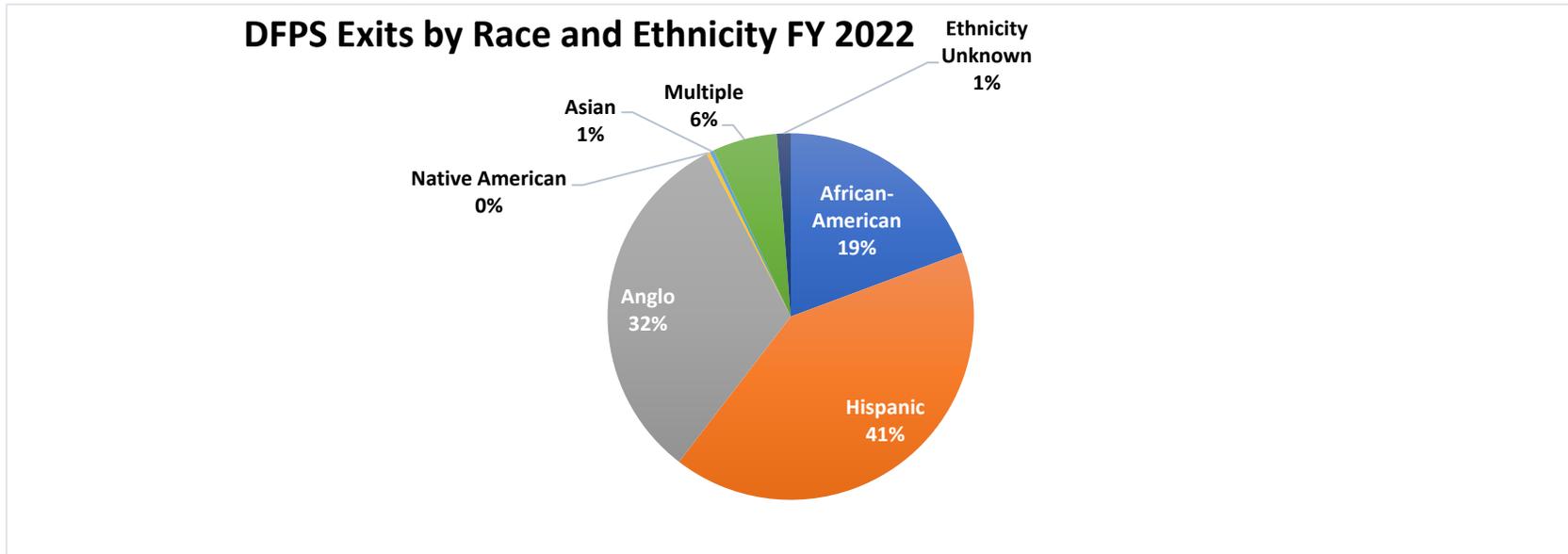
## Rate of Decline in Removals by Race/Ethnicity FY21 to FY22



### Children Exiting DFPS Custody by Race and Ethnicity, Fiscal Year 2022

Outcome	Children	African-American	Hispanic	Anglo	Native American	Asian	Multiple	Ethnicity Unknown
Returned Home	5,811	1,123	2,389	1,858	18	20	332	71
Custody Given to Relatives, Fictive Kin Permanency Care Assistance	881	282	343	213	0	4	34	5
Custody Given to Relatives, Fictive Kin, Non-Permanency Care Assistance	4,424	965	1877	1,304	2	17	214	45
Adoption Consummated Relatives	2,003	352	920	596	3	9	112	11
Adoption Consummated Non-Relatives	2,480	430	1,072	778	4	16	158	22
Emancipated	1,087	275	443	302	1	6	48	12
Other	194	42	74	53	3	1	17	4

Source: Data Warehouse (Feb 2023)

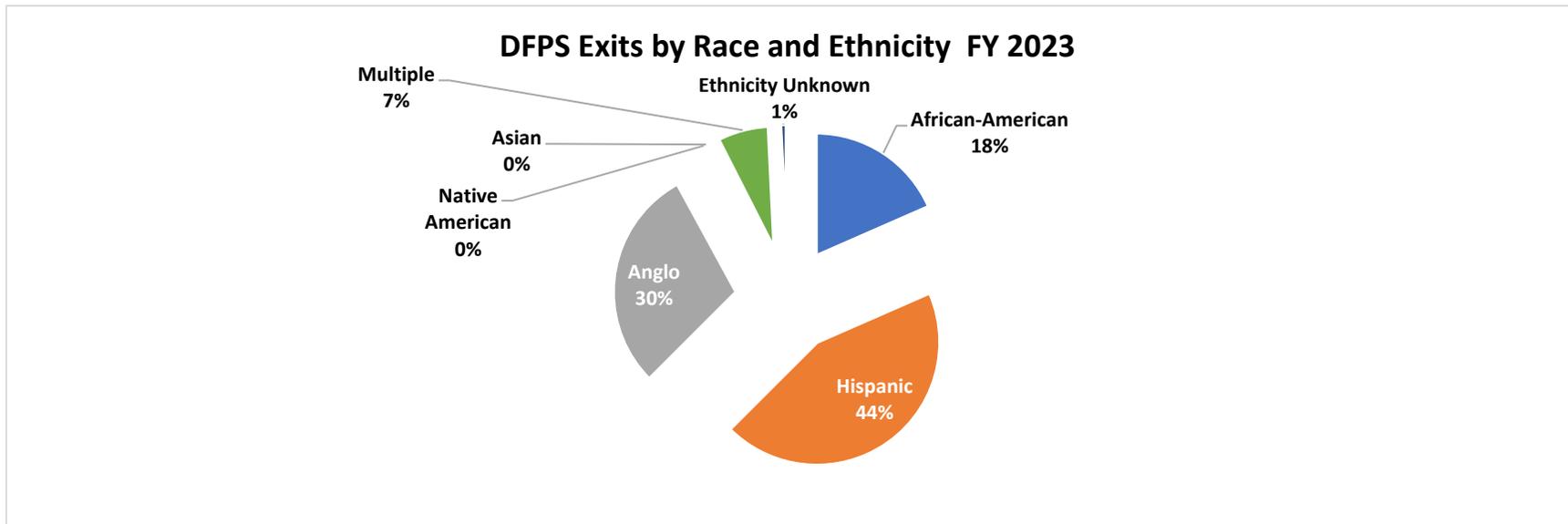




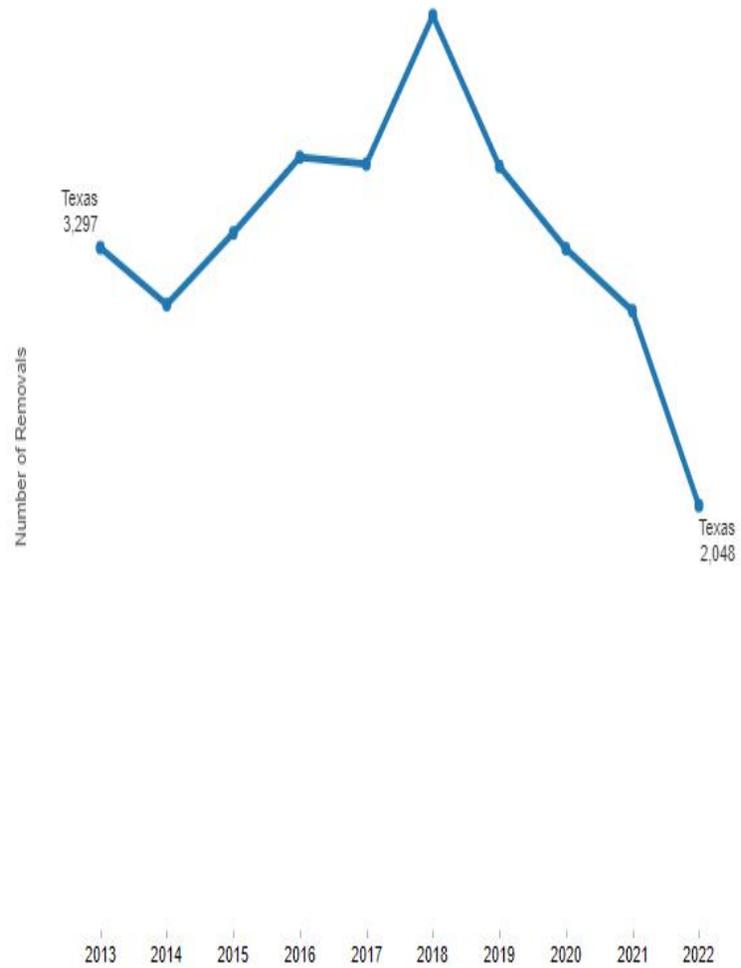
### Children Exiting DFPS Custody by Race and Ethnicity, Fiscal Year 2023

Outcome	Children	African-American	Hispanic	Anglo	Native American	Asian	Multiple	Ethnicity Unknown
Returned Home	1307	241	576	386	0	6	88	10
Custody Given to Relatives, Fictive Kin Permanency Care Assistance	172	57	71	35	0	0	8	1
Custody Given to Relatives, Fictive Kin, Non-Permanency Care Assistance	1175	264	484	354	1	4	58	10
Adoption Consummated Relatives	718	115	382	192	0	0	27	2
Adoption Consummated Non-Relatives	902	140	363	335	2	2	45	15
Emancipated	311	79	124	90	1	4	8	5
Other	37	6	11	14	0	1	2	3

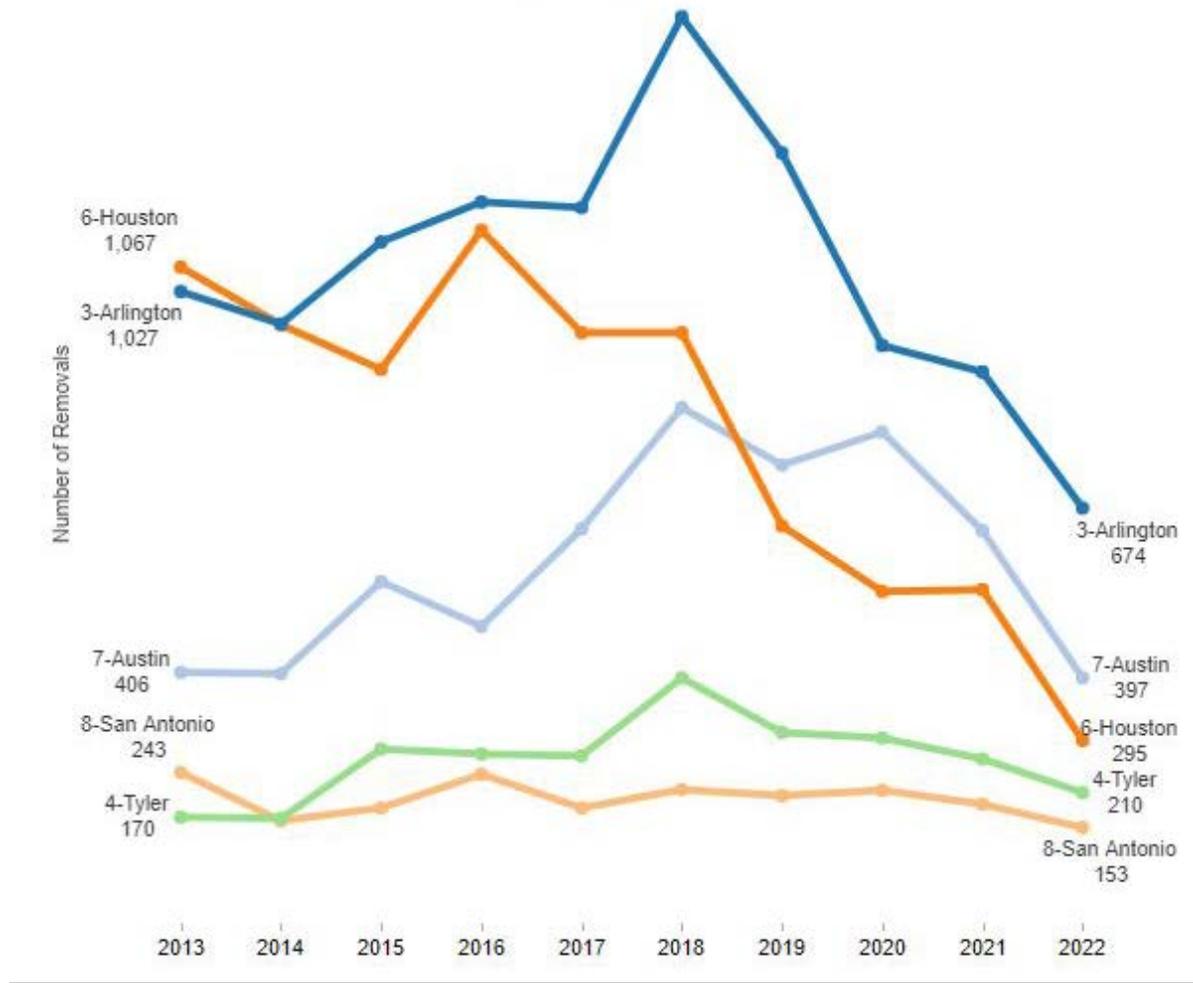
Source: Data Warehouse (2023)



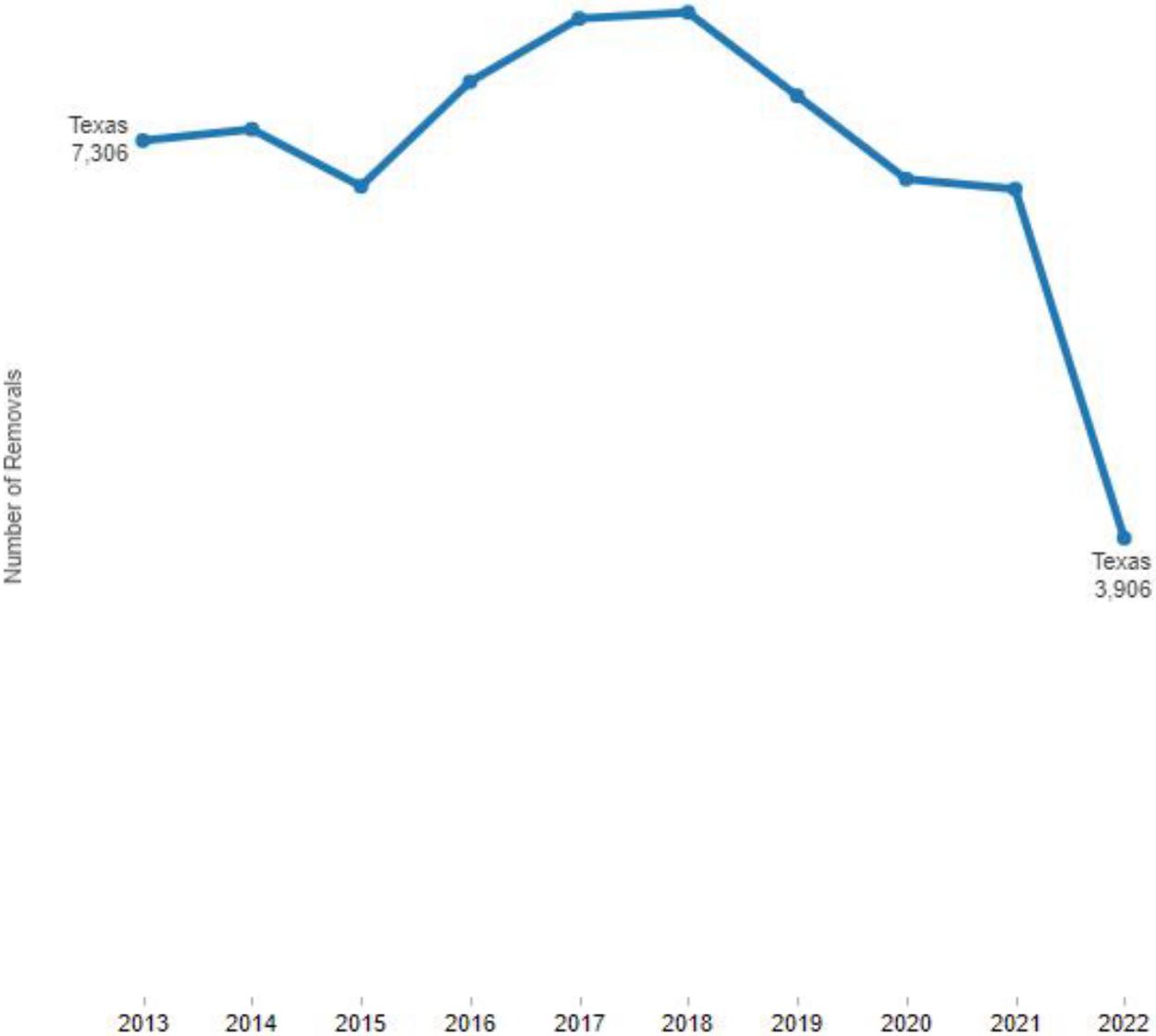
### CPS Removals for African-American Children by Regions in Texas

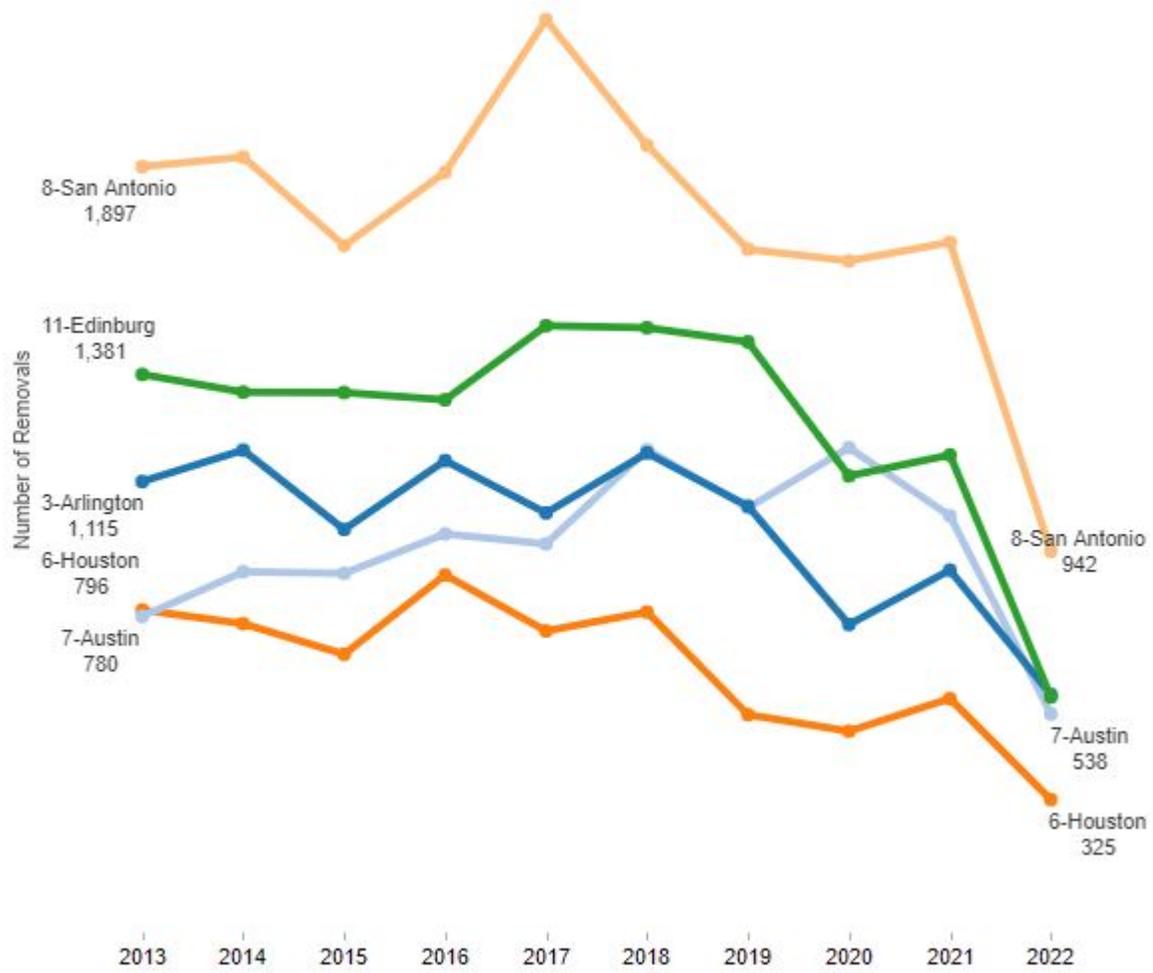


**CPS Removals for African-American Children by Top 5 Texas Regions**



**CPS Removals for Latino Children in Texas**

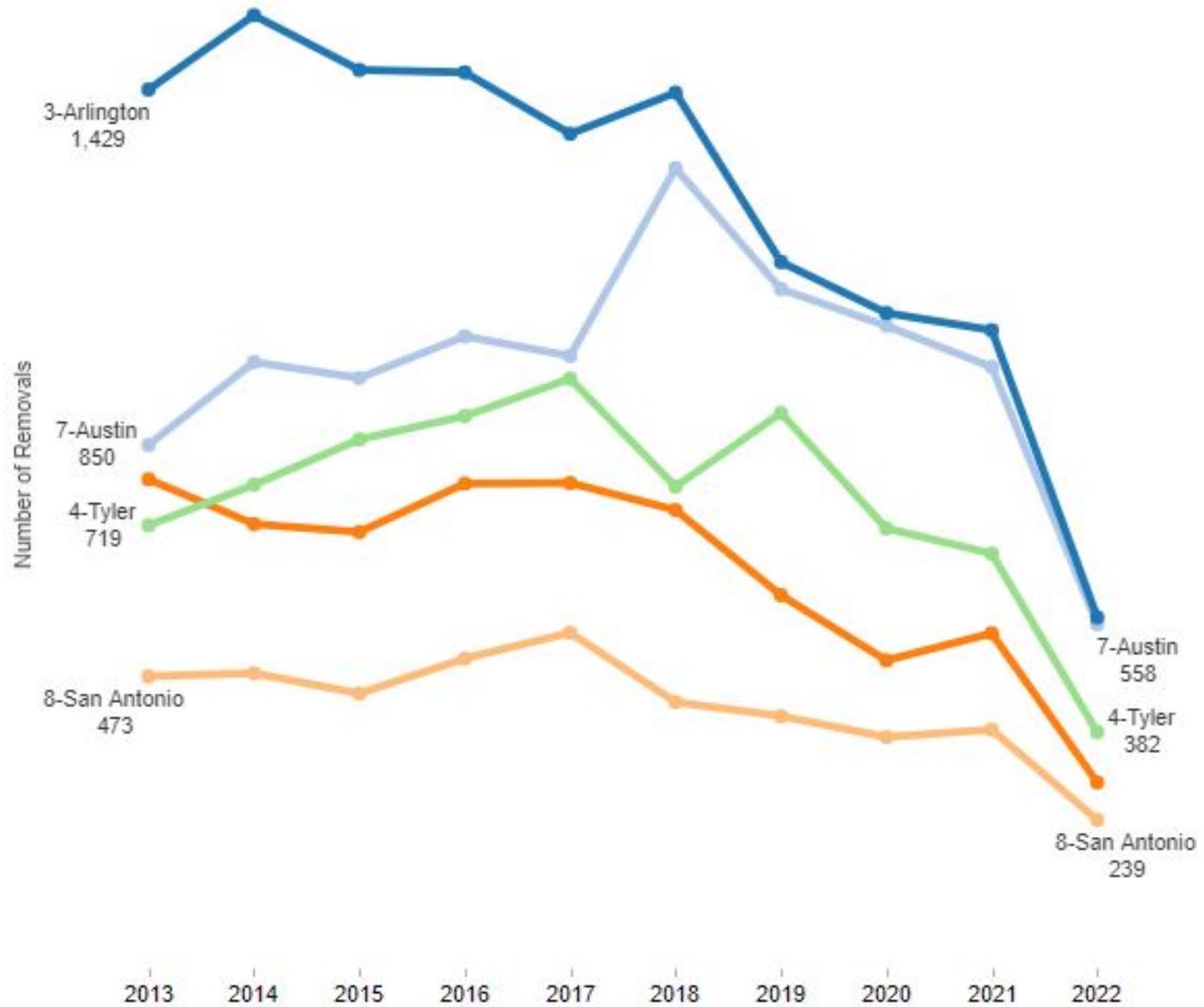




**CPS Removals for Anglo Children in Texas**



### CPS Removals for Anglo Children by Top 5 Texas Regions



**Strategy 3.3a Lead: Mosley (Moe) Hobson**

**Strategy 3.3a: Collection of data will be disaggregated by race and ethnicity to eliminate disparities at critical decision-making points.**

**Rationale:** Strategies to eliminate disparities are driven by reliable data disaggregated by race and ethnicity.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Annual data analysis reports related to disproportionality.	August 31 of each fiscal year	This report was submitted for approval in fiscal year 2022.
b. Analyze data at key decision-making points.	September 2020 and annually thereafter	This is incorporated in the annual report and removals in the seven largest counties are reported to the legislature.
c. Evaluation of new initiatives with data disaggregated by race and ethnicity.	September 2020 and annually thereafter	No new initiatives implemented to evaluate.

**Strategy 3.3b Lead: Mosley (Moe) Hobson**

**Strategy 3.3b: Enhance knowledge and awareness of concepts related to racial and ethnic disparities in the child welfare systems and intersecting systems for external and internal stakeholders.**

**Rationale:** Strategies to eliminate institutional barriers to equity are driven by integrated concepts of fairness and justice and guide all programs, policies, and practices.

Action Steps	Target Completion Date	Fiscal Year Accomplishment / Progress Status on Meeting Overall Goal and Objective
a. Train staff and community in inclusive service delivery principles.	Fall 2019 and ongoing thereafter	<ul style="list-style-type: none"> <li>• Collaborated with CLOE and programs to design and implement new curriculum around cultural humility.</li> <li>• Continued to offer in-person trainings to internal staff and external stakeholders.</li> <li>• Continued to participate in webinars and conferences that address strategies to address disproportionality and disparities in Texas communities.</li> <li>• Continued to make CPS and CPI supervisors aware of a culturally humble and anti-bias approach to casework.</li> </ul>
b. Host six disproportionality webinars targeted at increasing awareness related to issues of racial inequities each calendar year.	September 2020 and annually thereafter	Webinars offered on the DFPS learning site in 2023 were <i>Black History Month Celebration of Black Fathers</i> , black history month black migration, engaging fathers in the child welfare system, human trafficking and race equity, kinship care and race equity in child welfare, the Asian experience and LGBTQIA and Race Equity II.
c. Revise and publish Indian Child Welfare Act training for CPS and CPI staff.	September 2021	<p>The training was sent to Ysleta del Sur Pueblo representative for edits and received for review. A meeting was held with DFPS Legal, CPI, and CPS training liaisons to discuss initiating request for CLOE services. The revised course was completed in fiscal year 2021. The U.S. Fifth Circuit Court of Appeals appellate decision may impact revisions.</p> <p>The 2021 Texas Indian Child Welfare Act Summit was conducted in January 2021 with more than 1,200 participants. OADD is working with the CPS Indian Child Welfare Act liaison to plan the next Indian Child Welfare Act Summit in fiscal year 2023.</p>
d. Create and publish disproportionality computer- based training for CPS and CPI staff.	September 2021	Revisions for computer-based training remains ongoing. CPS and CPI staff are able to access the agency’s learning station for current trainings around addressing disproportionality and cultural humility.

# 2024 Title IV–B Annual Progress and Services Report

## IV. Annual Progress and Services Report (APSR)

### IV. B. Program Support

- *Describe the state’s training and technical assistance provided to counties and other local or regional entities that operate state programs and its impact on the achievement of CFSP/CFSR goals and objectives since the submission of the 2020-2024 CFSP and subsequent APSR. Describe training and technical assistance that will be provided by the state in the upcoming fiscal year. Include information on any additional technical assistance provided related to the COVID-19 pandemic and national public health emergency*
- *Describe the technical assistance and capacity building needs that the state anticipates in FY 2024 in support of the CFSP/CFSR goals and objectives. Describe how capacity building services from partnering organizations or consultants will assist in achieving the identified goals and objectives.*
- *Provide information on activities carried out since submission of the CFSP or planned for the upcoming fiscal year in the areas of research, evaluation, or management information systems in support of the goals and objectives in the CFSP. This may include activities carried out under discretionary grants awarded by the Children’s Bureau*

#### **Texas Juvenile Justice Department Technical Assistance**

The Texas Department of Family and Protective Services (DFPS) Child Protective Services (CPS) identified a specific strategy in its child and family service plan to improve communication and coordination of service planning for DFPS youth involved with the Texas Juvenile Justice Department or with local and county juvenile probation departments. These communication and coordination efforts helped ensure appropriate services were provided in a timely and cost-effective manner for the respective agencies. CPS regional juvenile justice liaisons are able to assist staff with case specific issues regarding local county juvenile probation departments or the Texas Juvenile Justice Department. With the establishment of Texas Juvenile Justice Department and DFPS liaisons at the state level and a Memorandum of Understanding signed by both agencies detailing the working relationship between both organizations, conference calls were held as needed to share information and resolve issues.

DFPS conducts a yearly quality assurance review of cases certified as Title IV-E eligible under the Texas Juvenile Justice Department’s Title IV-E program. A review of cases was conducted during Quarter 2 of fiscal year 2022. The Texas Juvenile Justice Department is revising plans and utilizing DFPS and Administration for Children and Families technical assistance to better refocus their efforts for the population. There are youth who entered the prior Title IV-E program and remained in a Title IV-E setting in fiscal year 2022 although new admissions have stopped.

## **Technical Assistance and Evaluation**

The DFPS Office of Data and Systems Improvement is responsible for supporting DFPS field and State Office in achieving safety, permanency, and well-being for abused and neglected children by providing strategic analysis and guidance on agency operations, policies, processes, and initiatives around child abuse and neglect.

The Regional Systems Improvement team is part of the division and exists to implement continuous quality improvement within the regional operations of the various DFPS systems. By embedding systems improvement principles and making data consumable at the local level, the team helps regional leadership strategically improve the functioning of their programs and increase safety, permanency, and well-being for the children and families DFPS serves. Regional systems improvement specialists engage in strategic planning, data monitoring and analysis, process analysis and improvement, and practice improvement in partnership with regional leadership.

The Regional Systems Improvement team continues to partner with the DFPS Division of Federal and Program Improvement Review to implement findings of root cause analysis meetings in each region in order to continue to overcome barriers to achievement of items below target in the CFSR Program Improvement Plan. Staff continues to provide regular feedback and information about progress on ongoing plans that help program move toward in meeting their goals.

The Data and Decision Support team is another component of the DFPS Office of Data and Systems Improvement that provides internal and external reports and data to all DFPS divisions, programs, the legislature, federal government, and other external stakeholders. This data provides insight and empowers staff and stakeholders to make the best decisions backed by timely, high-quality information.

The Analytics and Evaluation team is another component of the DFPS Office of Data and Systems Improvement that provides strategic guidance on child welfare processes, tools, and reports to improve decision making and child safety, use analytics to target high risk populations, analyze statewide program patterns and trends and evaluate new program initiatives. Some of their work includes:

- Providing strategic analysis and guidance on child welfare assessments, models, and quality assurance instruments and process;
- Evaluating the effectiveness of major program initiatives and significant programmatic changes around child abuse and neglect; and
- Conducting data analysis to better understand how the reporting, investigation and services systems that serve abused and neglected children are operating and impacting outcomes for children and families.

As the Analytics and Evaluation team is funded with CAPTA resources, their fiscal year 2023 activities are contained within that section of this annual report.

The DFPS Contract Performance team uses data and decision support, analytics and evaluation reports, and reports developed within their team to craft, track, and analyze

performance of CPS contractors to support contract managers and program in understanding and improving the quality of contracted services. They provide ongoing support of the CPS placement system, as well as quarterly updates on performance measures, in addition to helping facilitate discussions regarding data with contractors. They also play a crucial role in heightened monitoring efforts associated with providers who meet certain criteria concerning licensing.

The DFPS Office of Data and Systems Improvement, in general, has also played a supporting role in the programmatic response to COVID-19 by helping leadership understand the resulting staffing and workload challenges and respond accordingly.

### **External Technical Assistance and Evaluation**

DFPS has utilized technical assistance during the past year in order to improve outcomes to children and families. DFPS participated in the March 2022 federal survey and identified areas of interest in technical training and support in March. Below is a listing of the support DFPS received in fiscal year 2022.

- The 87th Texas Legislature directed DFPS to develop, with the assistance of the Texas Health and Human Services Commission (HHSC), an alternative methodology proposal for foster care and community-based care rates. To support this effort, DFPS engaged the help of the Texas Institute for Child & Family Wellbeing at the University of Texas at Austin, along with the Institute's project partner, Blackstone Solutions, LLC, to serve as consultants on the rate modernization project. Additionally, Casey Family Programs provided assistance through a contract with the Deckinga Group, LLC, to aid with facilitation of stakeholder engagement and the services of Pam McDonald Consulting, LLC, to provide expertise in the rate setting process.
- Casey Family Programs and the Deckinga Group are providing technical assistance to DFPS leadership in developing and implementing strategies to respond to capacity challenges contributing to an increase in the number of children cared for under DFPS staff supervision. CPS has Critical Response, Master Conservatorship, and Behavioral Health Services teams, who combine to assist with operations. The Deckinga Group and the Casey Group have helped to focus on strategies to eliminate "child watch." Additionally, the CPS regional directors and Placement team continue to engage residential providers in meetings to focus on capacity needs.
- Casey Family Programs, the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (Children's Commission), and the Texas Alliance for Child and Family Services have continued to provide support regarding the Family First Prevention Services Act, as DFPS analyzes its options and works to strategically plan and make recommendations for implementation of this complex federal legislation.
- The Office of the Governor's Committee on People with Disabilities and Disability Rights Texas provided consultation on DFPS policies and training relating to working with persons with disabilities.
- Chapin Hall of the University of Chicago continues to support an independent evaluation of performance and fiscal outcomes for Community-Based Care.
- In fiscal year 2022, DFPS received technical assistance and support in order to appropriately utilize HR133/pandemic funding with both Education and Training

Voucher funds, and traditional Chafee funds through the PanAid Program.

- Annually, regional directors facilitate a collaborative discussion about data from the foster care needs assessment. Through these meetings and other collaborative efforts, DFPS continues to partner with contracted providers and other stakeholders (e.g., judges, politicians, advocacy groups, church leaders, universities) to address substitute care capacity needs by identifying new strategies and evaluating current ones for improvement, as appropriate.
- The Capacity Center for States Learning Resources website (<https://capacity.childwelfare.gov/states/>) and its library of resources are routinely shared with DFPS leadership to utilize this training resource to support improvements and strengthen skill of staff and stakeholders.
- In fiscal year 2021, the National Training Initiative (NTI) free web-based adoption competency training was provided statewide to CPS Foster/Adoption Development supervisors and program directors. CPS added the training to its professional development plans for the first nine months after staff become case assignable. There is also a shell course in the DFPS Center for Learning and Organizational Excellence now, for staff credit on their transcript. This training will continue to be used to better address the mental health and developmental needs of children in foster, adoptive, or guardianship families.
- National Training and Development Curriculum for Foster and Adoptive Parents pre-service training for foster/adoptive parents is being reviewed by designated state and regional staff to assess its feasibility to use as a part of CPS training with prospective and current foster/adoptive parents. Final decision regarding its use will occur prior to the start of fiscal year 2023.
- DFPS participates in quarterly federal Region VI calls, as well as individual outreach to federal Region VI staff. Discussion topics are various and have addressed response to the COVID-19 pandemic, workforce issues, the federal Family First Act, and additional federal fund spending. Federal technical assistance has helped to clarify data elements for Adoption and Foster Care Analysis and Reporting System (AFCARS) and work on changes to the DFPS IMPACT system.
- DFPS staff working with kinship caregivers used the website to post on the Texas Kinship Caregivers FaceBook Page and the sample messages for posts on the page <https://capacity.childwelfare.gov/states/about/events/spread-the-word>. The Child Welfare Information Gateway resources, articles, and publications have been used with multiple workgroups and committees to further Texas best practice.
- The University of Kentucky hosts a national series with six states, including Texas, for strengthening the use of the Child and Adolescent Needs and Strengths (CANS) tool in child welfare. This series began in 2021 and continues as needed basis. Additionally, the University of Kentucky is providing technical assistance by assessing the decision-support model (formerly referred to as the algorithm) behind the Texas CANS tool and provided a latent class analysis of initial CANS results for children to assist with use in strengthening the service planning process. Technical assistance from the University of Kentucky has also been provided to the assessment workgroup on human trafficking and foster care rate modernization efforts.
- DFPS is collaborating with the Capacity Building Center for States, Region VI Administration for Children and Families, the federal Child and Family Services

Review team, and the MASC team in preparation for Round IV of the federal review process. This has included training, collaborative calls, and speakers to support our state's work.

### **IMPACT System**

Information Management Protecting Adults and Children in Texas or IMPACT is the statewide system for CPS and Adult Protective Services. All levels of staff use the system. IMPACT is available statewide at all times and supports all aspects of DFPS casework from intake to post-adoption services. Statewide Intake staff also use IMPACT to record and process all case-related information beginning with the intake of the report to case closure.

Consolidating and centralizing automation has improved case management. Cases can be accessed simultaneously, allowing for flexible case reporting and monitoring. All DFPS direct delivery staff can access IMPACT to input data. Supervisors can electronically review case information and documentation at any given time, supporting ongoing monitoring of cases for evaluation purposes. In addition, use of IMPACT applications standardized statewide forms usage and enforced system-wide edits applied to casework activities.

IMPACT is the data source for the annual National Child Abuse and Neglect Data System (NCANDS) federal report, as well as AFCARS data. Additionally, IMPACT supports various other web-based tools for information processing and analysis.

### **Fiscal Year 2023 IMPACT Updates**

DFPS Information Technology Services (ITS) developed a strategic plan for the IMPACT Update Program, a multi-year approach targeted at updating the architectural framework and user interface of the casework management system. ITS will incrementally deploy components of the updated IMPACT to provide benefits to DFPS staff and external partners. Key success factors include:

- Provide an intuitive application for all users;
- Provide dashboards for supervisors and workers to quickly identify time-sensitive tasks;
- Support policy-based decision making;
- Allow easy and quick access to relevant information;
- Allow external partners to access appropriate IMPACT data; and
- Allow timely modification as policy changes occur.

ITS initiated legacy IMPACT updates in fiscal year 2019 with an expectation to continue through fiscal year 2024. Two key areas within legacy IMPACT migrating to IMPACT 2.0 include conservator stages of service and administrative and other services. In fiscal year 2024, DFPS will continue updating the remaining modules.

Other activities in fiscal year 2023 included several IMPACT projects:

- Changes to support the foster care lawsuit include:
  - ▶ Tracking of child-on-child sexual victimization and child sexual aggression for

- ▶ children in DFPS temporary or permanent managing conservatorship;
- ▶ Tracking of temporary absences from placements by creating new placement types (i.e., runaway, hospitalizations, extended visits, retreat, school trip) for placement log tracking and Data Warehouse reporting;
- ▶ Improvement of caregiver notifications in IMPACT (in progress);
- ▶ Supporting Heightened Monitoring updates (in progress);
- ▶ Supporting Person Search Webservice updates (in progress); and
- ▶ Supporting childcare investigations documentation upgrades to include reports of abuse and neglect in IMPACT (in progress).
- ▶ Supporting Child Care Investigations Review Indicators updates (in progress).
- IMPACT modernization projects supporting Community-Based Care initiatives were completed during the biennium include:
  - ▶ Making batch systems improvements to support SSCC casework in the Community-Based Care model for Stages 1 and 2 (in progress); and
  - ▶ Making reporting enhancements to support caseload tracking at SSCCs (in progress).
- Other changes to support other agency needs and implementation of Families First Protective Services Act (FFPSA):
  - ▶ Modifying AFCARS reporting, which provides national information on children in foster care and children who were adopted;
  - ▶ Implementing an electronic data exchange between the IMPACT system and the NEICE Clearinghouse to support the federal legislation for the Interstate Compact on the Placement of Children;
  - ▶ Supporting IMPACT legacy forms upgrade to IMPACT 2.0 (in progress);
  - ▶ Upgrading IMPACT legacy adult protective services and mobile protective services to IMPACT 2.0 (in progress);
  - ▶ Upgrading IMPACT Legacy kinship and foster/adopt stages, as well as the remainder of resource functionality to IMPACT 2.0 (in progress);
  - ▶ Supporting IMPACT upgrades to meet Federal Bureau of Investigation compliance requirements supporting fingerprint background checks (in progress); and
  - ▶ Child Protective Investigations dispositions letters updates (in progress).

DFPS improves data exchange with providers and other external partners by keeping interoperability and security as forethoughts when working projects. Since the inception of the Community-Based Care model, DFPS has improved the transmission of the data to providers and is taking steps to further expand the data shared with providers through secure and encrypted means, as well as enforcing policies surrounding the sharing of data on an as-needed basis. Coordination with a vendor is underway to assess existing two-way data sharing capabilities with SSCC providers and an exceptional item request was made to the Texas Legislature to support interoperability supporting Community-Based Care. This methodology will enable newly onboarding SSCCs to engage in DFPS systems securely and efficiently, including IMPACT

### **Other Systems**

A new system, the General Placement Search (GPS), was developed based on the need to provide summary information for identified DFPS staff to facilitate timely placement of

children in DFPS conservatorship. First release of the GPS application was August 2021, which allowed providers to manually enter data into GPS and for the Centralized Placement unit to begin using the many systems features to assist in placement. The second release was November 2021, which allowed regional Foster/Adoptive Home Development staff to enter data into this system. The final release of full automation with SSCC Gateway and provider case management system systems went live January 2022. Training of all CPU was completed in January 2022. On-going training is in development with DFPS Center for Learning and Organizational Excellence. Websites for both internal and external users were developed and are regularly updated. GPS system support model is in place and being used. A quality assurance plan was completed. The GPS application is the primary tool used by placement teams to locate placement for children.

There are currently enhancements under consideration to increase productivity and user operability of GPS which were outside of the scope of the original request. The request is with DFPS IT governance to updated cost analysis.

Contracts for residential childcare services are required to include incentives and remedies for provider performance. The Performance Assessment Compliance Evaluation System was created to track, manage, and assess incentives and remedies. This system has been deployed and is utilized to assess the performance of residential providers in key areas to include completion of performance measures as outlined in the contract. The system records instances of compliance levels for the application of imposed financial remedies and awarded incentives as a mechanism to improve outcomes for children

The DFPS Prevention and Early Intervention division (PEI) continues to support the implementation of PEIRS into its programs as part of an ongoing effort to streamline data collection, organization, and analysis. Evaluation staff continuously reviews PEIRS data to identify data entry, system usage or timeliness issues. PEI continued to support the rollout of the PEIRS administrative functionality by creating and implementing administrative functionality trainings as well as an administrative functionality manual. The Research and Evaluation team provides technical assistance to internal and external PEIRS users regarding correct systems usage and timeliness of data entry on an ongoing basis. As part of ongoing expansion efforts, the team continues to support the development and refinement of several PEIRS outcome reports in the data analysis and visualization system, Tableau. These reports assist PEI in effectively reporting data regarding evidence-based programs, home visiting services, and overall supports to families to relevant stakeholders. PEI research and evaluation staff are engaged in a data literacy and continuous quality improvement training plan to assist staff and grantees in understanding and utilizing the available data in PEIRS and on the Tableau server.

PEI began contracting with Clear Impact in 2016 to bring training on results-based accountability to PEI-funded early childhood coalitions across the state. Results-based accountability provides shared language and framework for multiple stakeholders to align their work towards population outcomes. Embedded within results-based accountability is a process driving continuous quality improvement and accountability using a digital scorecard that tracks progress on indicated priorities. Five grantees continue this work in

fiscal year 2023 in Bastrop, Navarro, Potter, Tarrant, and Wichita counties. In fiscal year 2023, these grantees added their results-based accountability work with Clear Impact to their individual budgets, and PEI ended the state level contract.

PEI provides ongoing training and technical assistance to PEI grantees to empower them with skills necessary for them to engage with families in a meaningful way.

PEI provided the following technical assistance in fiscal year 2023:

- **Technical Assistance Vendor List** – PEI has procured a pool of technical assistance vendors to facilitate on-site training sessions, event workshops, and other opportunities for peer-to-peer learning for PEI sub-recipients statewide.
- **PEI Grantee Webinars** – PEI regularly offers trainings on topics specific to grantees and address different components of how PEI supports providers through training opportunities. Training examples include National Family Support Network training on Standards of Quality, Parent Café training, and training by PEI staff on budgeting, Prevention and Early Intervention Data System data entry, and data literacy.
- **Partners in Prevention Learning Series** – The Partners in Prevention (PIP) learning series focuses training opportunities for the wider prevention partners community through engaging on a deeper dive into topics. Fiscal year 2023 training topics include fostering interaction that builds communities and safe sleep.
- **Learning Hub** – The PEI learning hub is library of trainings available to grantees. The trainings cover a variety of topics and include recorded sessions from webinars and sessions from past trainings for grantee reference.
- **PIP Conference** – In the Fall of fiscal year 2024, PEI will host the annual PIP Conference which provides comprehensive information on the prevention of child maltreatment and juvenile delinquency to professionals and stakeholders in the prevention field. The conference attracts parent educators, youth service grantees, civic leaders, policy advocates, researchers, and others with a professional interest in child and family well-being, youth development, and juvenile justice. The conference will offer training sessions designed for participants to take away concrete skills and ideas to connect what they have learned with the families they serve, as well as expand or deepen their knowledge base.

In fiscal year 2024, PEI will continue to provide training and technical assistance through:

- Hybrid (i.e., in-person and virtual) PIP Conference;
- Continued implementation of Grantee Webinars, PIP Learning Series and the Learning Hub;
- Continued implementation of the Essentials of Home Visiting professional development courses;
- The National Family Support Network Standards of Quality for Family Strengthening and Support Virtual Certification Trainings which reflect an enhanced focus on diversity, equity, and inclusion and addressing community conditions that impact families' healthy development;
- Continued implementation of Parent Café certification trainings and providing technical assistance for Parent Café implementation; and
- Continue to partner with The Office of Child Safety to ensure staff and grantees are

up to date on the latest in prevention strategies and child safety training.

### **IT Operations**

ITS plans and coordinates all activities in alignment with agency strategic and business planning by DFPS programs by continuously making improvements in IT infrastructure, maintain systems, and networks; improving the information security posture in collaboration with the Information Security Office; and streamlining distribution of hardware and software for DFPS staff.

In fiscal year 2023, DFPS performed the following operational activities:

- Migrated to Microsoft O365 and established an independent DFPS network separate from HHSC;
- Migrated DFPS staff and contractors to new VPS client and gateway solution;
- Implemented MOVEit, a managed file transfer software that encrypts files and uses secure file transfer protocols to transfer data with automation, analytics, failover options, and meets compliance regulations like CJIS, SSA, PCI, HIPAA, CCPA/CPRA and GDPR; and
- Implemented OneTrust, a third-party risk management platform which streamlines every stage of the third-party lifecycle by automating workflows for third-party onboarding, assessment, risk mitigation, reporting, monitoring, and offboarding

### **Program Support**

The DFPS Program Support division provides the day-to-day direction, guidance, and coordination for the agency's program support functions, including:

- Program Logistics Support manages space in offices and ensures regional office facilities meet the needs of staff.
- The Application Support team provides Tier 2 support for staff within several internal/external applications. This includes resolving tickets called in to the customer service center and resolving IMPACT data errors that cannot be corrected on-line by staff. The Data Support unit provides guidance to staff regarding IMPACT common functions and resolving more complex data integrity issues. This unit also manages application security and user permissions, merges, and client role removal when approved. Merge specialists perform person merges to eliminate duplicate person records in IMPACT, improving IMPACT accuracy and staff's ability to locate case history.
- The Worker Safety Support team provides tailored assistance and support to staff who are threatened, harassed, or assaulted. They train staff on a variety of safety topics, and coordinate with leadership, Regional Administrative Services, and other partners to ensure staff safety. They also provide technical support and training for staff on the Safe Signal application.

### **Texas Permanency Outcomes Project**

The Texas Permanency Outcomes Project (TXPOP), refocuses practice, strengthens the workforce, and transforms how systems treat families within foster care. The TXPOP vision is to build shared power with children and families to reinvent foster care. Creating authentic relationships between all parties involved in child welfare (i.e., youth, their

families and everyone naturally connected to them, foster families, caseworkers, judges) will improve permanency outcomes and strengthen families. TXPOP has a three-pronged approach:

1. A practice model that is implemented and evaluated in three regions;
2. Statewide capacity building to change attitudes and beliefs regarding the importance of birth families; and
3. System engagement at the local and the statewide level.

### Practice Model

The TXPOP practice model is designed to provide flexible tools, targeted training, and ongoing support to foster caregivers, public caseworkers, and private agency staff so they can engage families and youth voice throughout the life of a case. The TXPOP team has spent a significant amount of time implementing the practice model in regions 02, 06, and 11. Regions 06 and 11 are fully implemented. Region 02 which came aboard later due to COVID is expanding across the region from Brownwood to Abilene to Wichita Falls. To date, more than 500 children have been served through the practice model. Initial CFSR suggests TXPOP cases are exceeding state standards on a majority of the targeted items, including Items 1-6, 7, 9-10, 12A, 12C, 14, and 16-18.

### Capacity Building

Capacity building activities have primarily focused on trainings of professionals and caregivers through practice model trainings and the Child Welfare Academy in each of the three project regions. To date, 204 professionals have been trained in the practice model and 258 professionals have been trained through the Child Welfare Academy in person trainings. In addition to the Child Welfare Academy, TXPOP created a social marketing campaign to increase the value of family engagement in the child welfare system. The campaign was designed by an advisory group of birth and foster parents. The key message of the campaign is: "Caregivers can best help children in their care thrive by building a supportive network around the child's whole family. Establishing a compassionate relationship with the family of the child is healing and transformative for everyone involved." The campaign was launched on October 24, 2022, at the Child Welfare Administrators Conference in Round Rock. More than 60 people attended the event. The TXPOP team also presented at multiple conferences and events around the state including the NASW Texas Annual Conference, the Texas Alliance of Child and Family Services Annual Conference and Positive Permanency Event, Waco Judicial Community, and the Texas Child Welfare Judges Conference.

### Systems Engagement

TXPOP has strong collaborations with local areas implementing the practice model while also having support at the state level. The primary collaboration vehicles for the project are the statewide Executive Advisory Group, along with the Local Advisory Groups in regions 02, 06 and 11. All advisory groups meet quarterly. The local advisory groups focus on implementing the practice model and advertising trainings in their area while the executive advisory group focused on sustainability.

## **Quality Improvement Center for Adoption and Guardianship Support and Preservation**

The Quality Improvement Center for Adoption and Guardianship Support and Preservation (QIC-AG) was a five-year federally funded project promoting permanence (when reunification is no longer a goal) and improved supports for adoptive and guardianship families. Working in partnership with eight sites, the QIC-AG identified and tested promising practices and evidence-based models of support and services for children and families both pre and post permanence. This federal project closed at the end of fiscal year 2019.

The QIC-AG created a permanency continuum framework to help structure work with sites and families pre and post permanence. The framework was developed on the premise that children in adoptive or guardianship families fare better when their families are fully prepared and supported to address issues before they arise, and if issues arise, before they escalate into a crisis.

Texas implemented an intervention that falls into the focused interval on the framework. Focused services are targeted for children who are experiencing challenging emotional, behavioral, or mental health issues that might negatively affect their movement to permanence through adoption or guardianship. Focused services are designed with a two-fold purpose. First, they are intended to meet the emotional, behavioral, and mental health needs of children whose current needs are hindering permanence. Second, focused services are designed to enhance the capacity of each family to meet the needs of their child and, ultimately, become a permanent resource.

Pathways to Permanence 2: Parenting Children Who Have Experienced Trauma and Loss (Pathways 2) was developed by Kinship Center, a member of Seneca Family of Agencies. Pathways 2 is designed for foster and adoptive parents, kinship caregivers, and guardians who are actively parenting children who have experienced trauma and loss. Pathways 2 is a seven-session series that uses a group-based format to enhance parents' and caregivers' ability in skilled application of strategies. The program is designed as a clinically informed competency-building training and delivered as an interactive learning experience with robust discussion. As designed by the program's developer, the Pathways 2 intervention has the following goals:

- Provide parents and caregivers with a foundational understanding (based on science and experience) of childhood trauma, grief, and loss, as well as an understanding of the impact of these issues on their children;
- Help parents and caregivers to recognize, identify, and address the core issues of adoption and guardianship stability;
- Empower parents and caregivers to have more empathy as their skills increase; and
- Stabilize families helping children heal from trauma.

Outcomes from the project were favorable and can be found in the [Texas Full Evaluation Report](#). Since the close of the federal project, DFPS has continued to implement Pathways to Permanence 2 in the project area, but limited resources have prevented DFPS from being able to provide the intervention statewide. DFPS has had preliminary

discussions with community stakeholders on ways to continue to support the training, but there is no definitive plan at this time. DFPS will continue to make efforts to utilize this intervention as appropriate with children in foster care and their families.

One virtual Pathways to Permanence 2 series was held in 2022 with eight participants. Only one participant completed the series. Due to rising demands on staff in the project area, no other series were held in 2022. DFPS is hopeful more series will be held in 2023.

### **Quality Improvement Center Collaborative Community Court Team**

Texas has a Quality Improvement Center Collaborative Community Court Team (QIC-CCCT) site in Harris County which uses a multidisciplinary approach to address the complex needs of families involved in the child welfare system. The team works together to develop individualized service plans for each family, with the goal of providing evidence-based services and interventions to address the underlying issues that contribute to child abuse and neglect. The demonstration site is charged with collaboratively addressing the health and substance use disorder treatment needs of infants, young children, and their parents or caregivers. The Infant-Toddler Family Intervention Court Project in Harris County is an intensive specialty program funded by both federal and local grants. The goal of the program is to provide families with the resources they need to address the issues that led to their involvement with child welfare and improve their overall wellbeing. Participants are assisted with transportation, emergency housing/rental deposits, childcare/camp fees, counseling, treatment, and medical assistance.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section V. Quality Assurance System**

**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**

# **2024 Title IV–B Annual Progress and Services Report**

## **Section V. Quality Assurance System**

**See Section III. Assessment of Performance for description of the agency's quality assurance program.**



**TEXAS**  
Department of Family  
and Protective Services

**The State of Texas**  
**2024 Annual Progress & Services Report**  
**Section VI. Services Description Update**

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**Texas Department of Family and Protective Services**

**ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## VI. Services Description Update

### A. Stephanie Tubbs Jones Child Welfare Services Program Title IV-B, subpart 1 – (CFS 101)

### B. Services for Children Adopted from Other Countries

- *Describe the activities, including provision of adoption and post-adoption supports, that the state has undertaken since the submission of the 2023 APSR to support the families of children adopted from other countries and any changes to the activities the state plans to take to support children adopted from other countries.*

Private child-placing agencies provide adoption and post-adoption services to families adopting children from other countries. The Texas Department of Family and Protective Services (DFPS) does not currently provide services specifically targeting children adopted abroad. However, children adopted from other countries who are reported to be abused and/or neglected receive child abuse and neglect intake and investigation services from DFPS.

The DFPS reporting system enables DFPS to identify the number of children removed from their families who were previously adopted internationally. DFPS obtains social histories when children come into foster care and also documents information related to the agencies that handled the placement or adoption, the plans for the child, and the reasons for the removal, if the child was removed due to abuse and neglect. This enables staff to report information on inter-country adoptions that disrupt or end in dissolution, resulting in DFPS being named the child's managing conservator.

IMPACT modernization, released in April 2019, made changes so DFPS data regarding international adoption is more accurate. This continues to aid in data reporting to ensure all international adoptions are being captured and reported accurately.

DFPS will continue to provide child abuse and neglect intake and investigation services as appropriate and capture and report data related to international adoptions. DFPS has no plans to develop services specifically targeting children adopted abroad.

### C. Services for Children under the Age of Five

- *Describe the activities the state has undertaken since the submission of the 2023 APSR to reduce the length of time children under the age of five are in foster care without a permanent family.*
- *Describe the activities the state undertook in the past year to address the developmental needs of all vulnerable children under five years of age, including children in foster care, as well as those served in-home or in a community-based setting.*

DFPS uses tracking, training, and specialized services for children to address the developmental needs of all vulnerable children under the age of 5 in foster care, as well as those served in a home or community-based setting and reduce the length of time children under the age of 5 are in foster care without a permanent family. Additionally, DFPS collaborates with external stakeholders to ensure identified barriers to permanency are addressed.

Tracking children under the age of 5 is done through the use of the Texas Statewide Automated Child Welfare Information System known as IMPACT. Reports are available to all DFPS staff through the Data Warehouse. In addition to using Data Warehouse reports, caseworkers' staff each individual case with their supervisor at least monthly. Regional specialized staff, such as education and developmental disability specialists, and nurse consultants act as subject matter experts in the areas of developmental disabilities, health, and education to aid the casework in tracking and identifying these children. Quarterly case reviews conducted by the CPS case analysts review education, medical, and behavioral health services to ensure the randomly selected cases include sufficient services to the population of children under the age of 5.

The reports available to staff regarding these children and the demographics and characteristics of the child include:

- **SA-04 Demographics of Children 0 – 17 in Substitute Care** – Although the second grouping includes 5-year-olds, not children under the age of 5, this report allows staff to pull the age, sex, race, and characteristics of each child in conservatorship.
- **HHSC-CPS\_01 SB\_368 CPS Substitute Care Children with Developmental Disabilities in Institutional Settings** – This report identifies children who are in substitute care and placed in institutional settings by the age, placement, and length of time in placement so staff can monitor this special population and ensure the placement is meeting the child's needs while continuing to make efforts to place the child in the least restrictive environment able to meet the needs of the child.
- **SA\_48 Special Healthcare Needs** – This report identifies children who have special healthcare needs. The report provides the name of the child, age, placement, and type of healthcare need, such as failure to thrive, health disabled, medically fragile, and terminally ill.
- **SA\_41 Child Placement Characteristics for Children in Open Substitute Care** – This report provides a comprehensive list of characteristics of each child on a caseworker's caseload. The count of children includes physical, psychological,

educational, and developmental characteristics.

- **PP\_03 Active Legal Status** – This report identifies the legal status of all children and can be sorted by age and includes whether they are in a placement intended to be permanent.

DFPS has developed approaches and services to reduce the length of time in care for children under the age of 5, including: enhanced case staffing; assessments and services for children with developmental disabilities; safety assessments; specialized service planning; and licensing requirements specific to this population. These approaches will continue to be utilized and enhanced.

While there is no data that specifically ties any one service to permanency outcomes for children under the age of 5, DFPS uses data to track and evaluate the effectiveness of the combination of these activities in reducing the length of time children are in foster care. In response to previous reviews, DFPS is analyzing outcomes specific to children under the age of 5 and has begun to identify data to look at the following outcomes: permanency; length of time to exit; and number of children placed in kinship homes.

Outcome	FY 2021 Children	FY 2021 Average Number of Months	FY 2022 Children	FY 2022 Average Number of Months
Returned Home	2,389	12.6	2,520	13.3
Custody Given to Relatives, Fictive Kin, Kinship with Permanency Care Assistance	323	23.3	310	23.1
Custody Given to Relatives, Fictive Kin, Kinship Non-Permanency Care Assistance	1,737	13.0	1,735	13.6
Adoption Consummated Non-Relatives	1,346	22.8	1,424	23.2
Adoption Consummated Relatives	1,051	23.6	1,035	24.0
Other	98	11.6	98	14.4
<b>Total</b>	<b>6,944</b>	<b>16.8</b>	<b>7,122</b>	<b>17.4</b>

DFPS continues to review this data and work with regional staff on strategies which target achieving permanency for this population. More children under the age of 5 exited DFPS conservatorship in fiscal year 2022 than fiscal year 2021. The average time to permanency increased across all areas, which resulted in a net increase of time to permanency.

In fiscal year 2022, a total of 9,466 children under the age of 5 were placed in a kinship home. This number includes both unverified and verified kinship homes. DFPS emphasizes efforts to increase the number of children who are placed in kinship homes and continues to work toward improving casework practices to support kinship placements and additional supports for the kinship caregivers. Through the use of kinship placements, this population is able obtain permanency with kin timelier if family reunification is not achievable.

Kinship focused caseworkers are housed throughout each region and provide the means for DFPS to support families in both urban and rural communities. Kinship development

workers are paired with conservatorship units to provide more connected and timely engagement with kinship families. The Kinship program has identified processes to enhance safety, permanency, and well-being for children through the provision of direct and indirect services for kinship caregivers and has developed ongoing programs to work with members of the community and within DFPS to improve support to kinship families.

In an effort to ensure vulnerable children under the age of 5 with specialized needs are placed in the most family-like setting, Developmental disability specialists coordinate on a case with a child who may meet waiver requirements or have special needs. These specialists are referred by and work with the primary caseworker to ensure each child is placed on any Medicaid waiver list to secure home and community-based settings, as well as any other specialized resources for which the child may be eligible.

DFPS utilizes early childhood interventions and available school setting services to address the developmental needs of vulnerable children including children in foster care, as well as those being served in a home or community-based setting. The Health and Human Services Commission (HHSC) Early Childhood Intervention program fiscal year 2022 data shows DFPS referred 6,509 children to the program for screening. A total of 904 children received Early Childhood Intervention services. These numbers reflect referrals and services from all stages of service. Although the data is in a downward trend from fiscal year 2021, this is not a negative indication according to the Early Childhood Intervention program. There has been extensive training and focus on education about when to make a referral across the state.

The Texas Education Agency has specific coding to capture data on students in foster care and education to their Public Education Information Management System (PEIMS), which identified 2,495 children in foster care who were enrolled in the free pre-kindergarten classes offered through Texas public school districts in the 2021-22 academic year. This information was collected from partner agencies and is not captured in the DFPS IMPACT system.

Each DFPS region created business plans were with some specifically address achieving positive permanency for children who have been in DFPS conservatorship for more than two years, including any child under the age of 5. Additionally, regional staff and the regional system improvement specialists examine regional progress to identify and overcome any systemic barriers to achieving permanency. The regional plans are updated and/or modified if the identified targets are not achieved.

DFPS continues to work on enhancing family visitation, as visitation is even more critical for young children. DFPS provided additional engagement training to staff and highlighted the importance of visitation. DFPS policy reflects the requirement for weekly in-person sibling visitations. These efforts are meant to aid in creating a positive shift in visitation practices across the state.

Permanency planning meetings are held for children in conservatorship through either permanency conferences or family group decision making meetings. In these meetings,

discussions on any barriers to achieve permanency for the child and the creation action steps to overcome those barriers are required. Additionally, DFPS works with external partners to create a single case plan model which combines the permanency planning meeting with the development of the Child's Plan of Service. DFPS will continue to work with additional external partners to expand the single case plan model. This initiative seeks to increase collaboration between Child Protective Services (CPS), parents, caregivers, and contracted placements on the development of the Child's Plan of Service and is designed to clarify goals and expectations and improve permanency and well-being outcomes.

All children aged 0 to 5 years, including those served in a home or a community-based setting, in DFPS conservatorship are screened through the Texas Health Steps program under STAR Health, the Texas Medicaid managed care program for children in the foster care system. Texas Health Steps is the state's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) system. Children are scheduled for their first check-up appointment within 30 days of DFPS securing custody of the child. The Texas Health Steps program provider is responsible for referring children with suspected or obvious developmental delays or disabilities to the Early Childhood Intervention program for screening. Some children, age 0 to 5 years meet to receive a 3-day medical exam covered by STAR Health within three business days of removal.

HHSC contracts with local agencies in every Texas county to provide services to eligible children. Caregivers and caseworkers may refer children directly to the Early Childhood Intervention program at any time if the CPS worker or caregiver suspects a developmental delay or disability. The Early Childhood Intervention program maintains screening information and literature on developmental milestones for children at all DFPS offices. In addition, the program provides screening information to all caregivers and parents who are referred for assessments. The Early Childhood Intervention program provides a transitional service to other programs once the child is 3 years old.

Children ages 3 to 5 years who have received early childhood intervention services and been identified as requiring additional services will transition to a Preschool Program for Children with Disabilities offered through local public schools. School staff will do specific assessments to determine what services will best meet the needs of each child. Children transitioning from the Early Childhood Intervention program may enroll in a pre-kindergarten program offered at the local public school or be eligible for the Preschool Program for Children with Disabilities with or without additional services depending on the needs of the child.

Children ages 3 to 5 years in foster care who have received early childhood intervention services and no longer require additional ancillary services enter pre-kindergarten programs offered through local public schools. Pre-kindergarten is available to all children currently in foster care, those being served in a home or in a community-based setting, and children who were ever in foster care as a result of an adversary hearing.

CPS policy directs all caregivers with children ages 3 to 5 years to enroll those children in a free pre-kindergarten program offered through a Texas public school, if appropriate for

the particular child. Children ages 3 to 5 years are also eligible for pre-kindergarten programs offered through the Head Start program in their community. Head Start is a federally funded early childhood education program available in many communities for children under the age of 5. The two types of Head Start eligibility are income-based and categorical. Children in foster care are categorically eligible for Head Start and Early Head Start. Pre-kindergarten and early childhood education programs at the local public school or through Head Start may not be available in the local community or appropriate for each child.

All pre-kindergarten children, ages 3 to 5 receive an education portfolio so the education needs of the child can begin prior to entry into elementary school and follow the child throughout his or her educational journey.

Children under the age of 5 years are assessed initially when they come into care for developmental and health needs. During the initial investigation stage, the safety assessment addresses children ages years and under for safety and vulnerability. Specifically, the tool collects information on the following questions:

- Is the child five years old or younger?
- Is the child diagnosed or suspected to have a medical or mental condition, including medically fragile?
- Does the child have a limited or not readily accessible support network?
- Does the child have diminished mental capacity?
- Does the child have diminished physical capacity?

Responses to these questions are used to ensure the safety of the child and determine appropriate services for the child and the family to ensure the needs of the child are met. Once DFPS has taken custody of the child, DFPS has policy directed specifically toward this young population. CPS Handbook Section 6242.2 requires that when developing a family plan of service with a family who has a child under the age of 2, the worker must consult with relevant professionals to determine the skills or knowledge the parents should learn or acquire to provide a safe placement for the child. The worker discusses this with the parents and ensures that those skills and abilities are incorporated into the service plan as appropriate. Staff should also consider the need for supervised therapeutic visits between the child and the child's parents by a licensed psychologist or another relevant professional, to promote family reunifications and educate the parents about issues relating to the removal of the child. While the steps above are required for a child under the age of 2, the worker may and should consider them for children older than 2 years.

Children who come into DFPS conservatorship over the age of 3 receive a Child and Adolescent Needs and Strengths (CANS) Assessment within 30 days of entering care. Children who are under the age of 3 receive the assessment within 30 days of turning 3 years old. This assessment is typically conducted by a STAR Health credentialed provider certified to administer the tool and is used to aid in the development of the Child's Plan of Service. This assessment is also used to aid in the identification of needed services for vulnerable children who are later served through placements in home or community-based settings. With the COVID-19 pandemic and the additional flexibility the option

provides, the CANS Assessment was permanently made available via telehealth in March 2021 to include children and youth ages 3 to 17 years old.

DFPS has also utilized training of caseworkers and caregivers to address the developmental needs of vulnerable children and reduce the length of time in foster care. These trainings will continue to be used over the next five years and modified and enhanced to address identified trends and needs. CPS uses a case reading tool for conservatorship program directors and supervisors to assist with reading case for a lens toward permanency and ensuring the developmental needs of vulnerable children are met.

Training of prospective foster parents is required by HHSC through the Minimum Standards and Guidelines for child-placing agencies. These standards require all foster parents to receive an orientation and additional training in areas such as the developmental stages of children; fostering child self-esteem; constructive guidance and discipline of children; strategies and techniques for monitoring and working with children; and normalcy. Other required pre-service training topics include trauma-informed care; different roles of caregivers; measures to prevent, identify, treat, and report suspected occurrences of child abuse, including sexual abuse, neglect, and exploitation; procedures to follow in emergencies, such as emergencies related to weather, volatile persons, or severe injury or illness of a child or adult; and preventing the spread of communicable diseases.

Foster parents are also required to complete cardiopulmonary resuscitation (CPR) and first aid training. Prospective foster and adoptive parents caring for children under 2 years of age must be trained in Shaken Baby Syndrome, Sudden Infant Death Syndrome, and early childhood brain development. Foster and adoptive parents caring for children taking psychotropic medications must be trained on the administration of psychotropic medications.

All caregivers, except those designated as kinship caregivers, must complete a maximum 35 hours of competency-based pre-service training before becoming verified to foster and/or approved to adopt. The Parent Resources for Information Development Education (PRIDE) curriculum is the prescribed training used for DFPS foster and adoptive home applicants. This curriculum meets a majority of the pre-service training requirements specified in Minimum Standards. DFPS may exceed 35 hours of pre-service training based on the needs of the child placed, including training regarding treatment of children with complex medical needs, sexual victimization, sexual aggression, emotional disorders, intellectual and developmental disabilities; the treatment of human trafficking victims, and any other situation DFPS determines would require additional training.

As a prospective pre-service training to replace PRIDE, DFPS has chosen the National Training and Development Curriculum which is funded through a cooperative agreement with the Texas Department of Health and Human Services, Administration for Children and Families, Children's Bureau, and Spaulding for Children released in June 2022. Because the National Training and Development Curriculum is not Texas specific, DFPS is modifying and developing the curriculum to meet Child Care Regulation's Minimum

Standards. Target date for completion of the DFPS curriculum model and statewide implementation is June 2023.

**In the APSR, States must report on their efforts to provide developmentally appropriate services. This information must include:**

**The number of children under the age of five in DFPS conservatorship not in a permanent home in FY 2022;**

Fiscal Year	Total Number of Children
2022*	5,913

FY 2022 includes children who were in an out-of-home placement.

**All Children Under Age Five in Conservatorship of DFPS**

The method of tracking these children and the demographics and characteristics of the identified children is to identify and follow these children to ensure oversight of age-appropriate services.

**Statewide Substitute Care Population Demographics for Children Under Age 5 as of August 31, 2022**

Region	Number of Children	0 to 2 years of age	3 to <5 years of age	Female	Male	Unknown
01	470	314	156	217	253	0
02	516	359	157	267	249	0
03	1,763	1,269	494	872	891	0
04	529	383	146	236	293	0
05	442	322	120	213	229	0
06	1,040	703	337	478	562	0
07	1,374	970	404	677	697	0
08	1,329	934	395	608	721	0
09	266	189	77	124	142	0
10	133	96	37	61	72	0
11	625	430	195	283	342	0
<b>Total</b>	<b>8,487</b>	<b>5,969</b>	<b>2,518</b>	<b>4,036</b>	<b>4,451</b>	<b>0</b>

**Statewide Substitute Care Population Demographics by Race and Ethnicity for Children Under Age 5 as of August 31, 2022**

Region	Number of Children	African American	Hispanic	Anglo	American Indian	Asian	Multiple	Unknown Ethnicity
01	470	42	251	148	0	3	17	9
02	516	60	182	222	1	3	40	8
03	1,763	591	497	525	0	9	112	29
04	529	142	59	260	0	4	48	16
05	442	139	36	226	0	1	34	6
06	1,040	324	334	296	2	6	63	15
07	1,374	331	471	430	0	7	122	12
08	1,329	112	964	188	0	3	31	31
09	266	16	154	86	0	0	7	3
10	133	9	116	8	0	0	0	0
11	625	12	546	60	0	0	2	5
<b>Total</b>	<b>8,487</b>	<b>1,778</b>	<b>3,610</b>	<b>2,449</b>	<b>3</b>	<b>36</b>	<b>476</b>	<b>134</b>

**Statewide Substitute Care Population by Characteristics for Children Under Age 5  
as of August 31, 2022**

Region	Number of Children	Physical	Medical	Drug Alcohol	Emotional	Learning	Sibling	Teen Parent
01	470	1	6	51	1	6	31	0
02	516	1	19	105	0	14	21	0
03	1,763	5	79	280	6	48	37	0
04	529	4	19	73	6	36	42	0
05	442	3	19	70	7	22	33	0
06	1,040	8	50	138	3	38	106	1
07	1,374	3	33	254	4	46	165	0
08	1,329	3	32	197	2	30	30	0
09	266	2	11	31	2	9	3	0
10	133	2	8	28	1	12	1	0
11	625	4	20	89	3	13	10	0
<b>Total</b>	<b>8,487</b>	<b>36</b>	<b>296</b>	<b>1,316</b>	<b>35</b>	<b>274</b>	<b>479</b>	<b>1</b>

Note: A child may have no characteristic, one characteristic, or more than one characteristic.

#### **D. Efforts to Track and Prevent Child Maltreatment Deaths**

- *Provide an update of the steps the state is taking to compile complete and accurate information on child maltreatment deaths to be reported to NCANDS, including gathering relevant information on the deaths from the relevant organizations in the state including entities such as state vital statistics department, child death review teams, law enforcement agencies, or offices of medical examiners, or coroners; and*
- *An update on the steps the state is taking to develop and implement a comprehensive, statewide plan to prevent child maltreatment fatalities that involves and engages relevant public and private agency partners, including those in public health, law enforcement, and the courts. Provide a copy or link to any comprehensive plan that has been developed.*

Texas ensures information regarding child fatalities is publicly available upon request, in accordance with Texas Family Code, Section 261.203. The process for creating the reports is automated to the greatest extent possible. DFPS provides the public information on near fatalities in much the same manner as information is provided on abuse and neglect related fatalities. Staff review the IMPACT case information and complete a form using summary information which is then reviewed by DFPS Legal to ensure only releasable information is included. The information can then be provided to the public upon request.

The source of information used for tracking and reporting child maltreatment fatalities is the "reason for death" field and based on an allegation with a disposition of "reason to believe" with a severity of "fatal", and the child has a date of death in the contained in IMPACT. The "reason for death" field indicates if the fatality was related to abuse or neglect and if CPS had been previously involved with the child and family.

DFPS uses information gathered by law enforcement and medical examiner's offices to reach dispositions in the child fatalities investigated by DFPS. Fields have been added in IMPACT to document preliminary or final medical examiner findings regarding cause and manner of death. Medical examiner finding information is not transmitted to the federal National Child Abuse and Neglect Data System as it does not currently have a field to receive this information. Preliminary or final medical examiner findings regarding cause and manner of death reporting is considered as part of the decision-making process for the CPS "reason for death."

DFPS is the primary agency required by law to investigate and report on child maltreatment fatalities in Texas when the perpetrator is a person responsible for the care of the child. Information from the state's vital statistics department, child death review teams, law enforcement agencies, and medical examiner's offices is often used to make reports to DFPS that initiate an investigation into suspected abuse or neglect which may have led to a child fatality. DFPS uses information gathered by law enforcement and medical examiner's offices to reach dispositions in the child fatalities investigated by DFPS. Other agencies, however, have different criteria for assessing and evaluating causes of death that may not be consistent with Texas Family Code child abuse and neglect definitions

and/or may not be interpreted or applied in the same manner as with DFPS. The ongoing coordination with other organizations such as the state's vital statistics department, child death review teams, law enforcement agencies, and medical examiners allows DFPS to report a complete and accurate data set to National Child Abuse and Neglect Data System for those child fatalities investigated under DFPS jurisdiction.

DFPS produces an annual report regarding child fatalities investigated for suspected abuse and neglect. This report is published by March 1 of each year.

The *Fiscal Year 2022 Child Maltreatment Fatalities and Near Fatalities Annual Report* was published on March 1, 2023, and is available on the DFPS public website at the following location:

[https://www.dfps.texas.gov/About\\_DFPS/Reports\\_and\\_Presentations/PEI/documents/2023/2023-03-01\\_Child\\_Maltreatment\\_Fatalities\\_and\\_Near\\_Fatalities\\_Annual\\_Report.pdf](https://www.dfps.texas.gov/About_DFPS/Reports_and_Presentations/PEI/documents/2023/2023-03-01_Child_Maltreatment_Fatalities_and_Near_Fatalities_Annual_Report.pdf)

As contained within the report published in March 2023, the general findings include:

Category	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Child Population of Texas	7,370,193	7,437,514	7,515,129	7,594,941	7,675,490
Number of Intakes Assigned for Investigation or Alternative Response by Child Protective Investigations (CPI)	246,074	242,103	224,288	253,054	273,415
Number of Investigated Child Fatalities	785	772	826	964	997
Number of fatalities where abuse or neglect was confirmed	211	235	251	199	182
Child fatality rate per 100,000 children	2.86	3.16	3.34	2.62	2.37
National rate for equivalent federal fiscal year <sup>i</sup>	2.39	2.48	2.38	2.46	***

Source: Data from US Census Bureau; Texas State Data Center; DFPS Data Books fiscal years 2010 to 2022; DFPS Data Warehouse Report FT\_06; U.S. Department of Health and Human Services. Population Data Source: Population Estimates and Projections Program, Texas State Data Center, Office of the State Demographer and the Institute for Demographic and Socioeconomic Research, University of Texas at San Antonio. Current Population Estimates and Projections Data as of December 2022 estimates were updated during fiscal year 2019 for population from 2010 through 2019.

\*\*\* Child Maltreatment 2022 data is scheduled to be released in Spring 2024.

DFPS partners with the Texas Department of State Health Services to analyze and link DFPS-Child Fatality Review Data (DFPS-CFR) with other data sources including birth records, death records, and community-level risk indicators (i.e., concentration of poverty,

education levels, or mobility). The focus of these analyses is to:

- Understand the prevalence of abuse and neglect fatalities within the population;
- Identify communities that are high risk for specific types of abuse and neglect fatalities; and
- Explore which risk factors in the family are associated with abuse and neglect.

The collaboration between these two agencies aims to use these results to guide a strategic plan to coordinate support services with the ultimate goal of reducing abuse and neglect fatalities by providing timely, coordinated, and evidence-based services to families and communities in need. By taking into consideration the entire population to understand, analyze, and build comprehensive strategies to target child abuse and neglect fatalities, DFPS and the Texas Department of State Health Services can leverage resources, programs, and community collaborations to target specific issues and geographical areas based on their individual needs. This data match will be updated in fiscal year 2023 to assess change over time on child fatalities and help focus ongoing strategies to support child safety.

Through the Prevention and Early Intervention (PEI) Division, DFPS developed a five-year *PEI Strategic Plan* to align with the overarching recommendation of both the Federal Commission to Eliminate Child Abuse and Neglect Fatalities and Texas' Protect Our Kids Commission and CAPTA requirements to develop a statewide plan to prevent child maltreatment fatalities and near fatalities. Utilizing a public-health approach that recognizes the importance of strong, integrated, and collective responsibility and coordination across agencies and within communities, this plan ensures the work of PEI reduces the risk of child maltreatment, fatalities, and other childhood adversities.

The *PEI Strategic Plan* is updated every five years and has a corresponding business plan to support the ongoing work of the strategic plan.

- PEI Five Year Strategic Plan for FY2016 through FY2021:  
[http://www.dfps.state.tx.us/About DFPS/Reports and Presentations/PEI/documents/2017/2016-09-01 PEI Five Year Strategic Plan.pdf](http://www.dfps.state.tx.us/About%20DFPS/Reports%20and%20Presentations/PEI/documents/2017/2016-09-01%20PEI%20Five%20Year%20Strategic%20Plan.pdf)
- FY 2021 Update on the PEI Five-Year Strategic Plan:  
[http://www.dfps.state.tx.us/About DFPS/Reports and Presentations/PEI/documents/2021/2021-09-01 PEI Strategic Plan Update%20.pdf](http://www.dfps.state.tx.us/About%20DFPS/Reports%20and%20Presentations/PEI/documents/2021/2021-09-01%20PEI%20Strategic%20Plan%20Update%20.pdf)
- PEI Five Year Strategic Plan for FY2022 through FY2026:(published September 1,2021):  
[http://www.dfps.state.tx.us/About DFPS/Reports and Presentations/PEI/documents/2021/2021-09-01 PEI Five Year Strategic Plan.pdf](http://www.dfps.state.tx.us/About%20DFPS/Reports%20and%20Presentations/PEI/documents/2021/2021-09-01%20PEI%20Five%20Year%20Strategic%20Plan.pdf)
- FY2022 PEI Business Plan  
[http://www.dfps.state.tx.us/About DFPS/Reports and Presentations/PEI/documents/2021/2021-12-07 PEI FY22 Business Plan.pdf](http://www.dfps.state.tx.us/About%20DFPS/Reports%20and%20Presentations/PEI/documents/2021/2021-12-07%20PEI%20FY22%20Business%20Plan.pdf)
- FY2022 Update on the PEI Five-Year Strategic Plan:  
[https://www.dfps.texas.gov/About DFPS/Reports and Presentations/PEI/documents/2022/2022-09-01 FY2022 PEI Strategic Plan Update.pdf](https://www.dfps.texas.gov/About%20DFPS/Reports%20and%20Presentations/PEI/documents/2022/2022-09-01%20FY2022%20PEI%20Strategic%20Plan%20Update.pdf)

<sup>1</sup> U.S. Department of Health and Human Services, Administration of Children and

Families, Administration on Children, Youth and Families, Children's Bureau. (2023). *Child Maltreatment 2021*. Available at <https://www.acf.hhs.gov/cb/report/child-maltreatment-2021>

## **E. Mary Lee Allen Promoting Safe and Stable Families (PSSF) (Title IV-B, subpart 2)**

- *Briefly describe the services provided since the submission of the 2023 APSR highlighting any changes or additions in services or program design for FY 2024 and how the services assisted or will assist in achieving program goals. Provide an update to the services the state offers under each category in title IV-B, subpart 2: family preservation, family support, family reunification, and adoption promotion and support services.*
- *Provide a final update about how the FY 2021 supplemental funding from Division X was used to strengthen the services provided by the state under the PSSF program. Describe any challenges or barriers the state faced in being able to use these funds. The supplemental funding, like regular appropriations, is subject to a requirement that a significant portion be spent on each PSSF service area: family preservation, family support, family reunification, and adoption promotion and support services. If the amount of supplemental funding used for each service category did not approximate 20 percent of the supplemental grant total, provide an explanation for the disproportion used in any of the service areas.*

### **Family Preservation Services**

Family preservation services are provided through CPS Family Based Safety Services. As previously indicated, staff provide direct services to help families alleviate crises that might lead to the out-of-home placement of children; maintain the safety of children in their own homes; support families in obtaining services; and promote parent competencies and behaviors that will enhance the parent's protective actions and abilities to promote child safety in the home and successfully nurture their children. Most children receiving family preservation services continue to live at home, but some children may temporarily live elsewhere in what is called a parental child safety placement (voluntary) with relatives or close friends until it is safe for them to return home. The following family preservation services are provided statewide:

- **Purchased Client Services** – For families receiving family preservation services (i.e., family counseling, crisis intervention, behavioral health services and treatment, domestic violence intervention, protective day care, professional psychiatric or psychological counseling services, substance abuse assessment and treatment counseling; and
- **Concrete Services** – For the provision of tangible goods to families in family preservation, family substitute care (family reunification impending) or family reunification stages of service to alleviate crises that might lead to the out-of-home placement of children, maintain the safety of children in their own homes or expedite the return of the children to the home, including minor home repair or cleaning, furniture for safe sleep for a child, professional house cleaning, kitchen appliances or equipment.

## Families and Children Receiving Family Preservation Services Fiscal Year 2022

Region	Families	Children
01	950	2,363
02	756	1,894
03	3,564	9,066
04	744	1,911
05	337	909
06	1,929	5,631
07	1,084	2,686
08	2,463	6,506
09	568	1,358
10	785	1,976
11	1,195	3,523
Out of State	4	10
<b>Total</b>	<b>14,379</b>	<b>37,833</b>

Source: DFPS Data Book

**Monthly Average of Children and Families Receiving Purchased Services Fiscal Year 2022**

Region	# Adults Served	# Children Served	Total Number Served*	Child Status Living at Home	Child Status Living Out of Home**	Post Adoption
01	909	498	1,407	165	338	9
02	702	379	1,082	150	237	6
03	3,316	1,673	4989	512	1122	86
04	1,125	420	1,545	185	241	6
05	626	281	907	77	208	4
06	2,366	1,421	3,787	514	948	36
07	2,414	1,283	3697	517	797	14
08	2,443	1,135	3578	432	735	14
09	534	214	748	58	157	5
10	338	244	583	129	123	2
11	1,548	536	2,085	166	391	1
<b>Total</b>	<b>16,323</b>	<b>8,084</b>	<b>24,407</b>	<b>2904</b>	<b>5296</b>	<b>181</b>

Source: DFPS Data Book

Note: Averages are rounded to the nearest whole number.

\*Data available in Data Book as "Children and Adults"

\*\*Labeled in Data Book as "Children in Sub Care"

## Average Monthly Children Receiving CPS Purchased Services Fiscal Year 2022

Region	# Children in Home Served	# Children in Substitute Care Served	% of Children in Substitute Care	Total # of Children in Substitute Care
01	165	338	24.8%	1,362
02	150	237	18.6%	1,276
03	512	1,122	26.4%	4,243
04	185	241	17.1%	1,410
05	77	208	21.0%	989
06	514	948	33.2%	2,857
07	517	797	23.9%	3,329
08	432	735	21.6%	3,401
09	58	157	22.4%	702
10	129	123	33.5%	367
11	166	391	23.7%	1,647
<b>Total</b>	<b>2,904</b>	<b>5,296</b>	<b>24.5%</b>	<b>21,583</b>

Source: DFPS Data Book

\* Based on fiscal year 2022 children in substitute care on August 31.

### Family Support Services Community-Based Child Abuse Prevention (CBCAP)

PEI provides grants to local non-profits, governments, and schools to deliver community-based services to families PEI contracts with The University of Texas Health Science Center at Tyler to develop [community maltreatment risk maps](#) to strengthen the approach in identifying and allocating resources to communities where families could benefit from them. PEI released updated maps in fiscal year 2021, coinciding with the release of the PEI [2022-2026 five-year strategic plan](#). The maps include interactive functionality utilizing both ZIP Code and county level data on risk and resiliency, as well as detailed, accessible descriptions of the various metrics used to assess risk in different age cohorts. PEI continues to use the maps to strengthen the approach in identifying and allocating resources within communities where families could benefit from them the most

The following PEI programs are funded in full or part with Community-Based Child Abuse Prevention federal and/or supplemental American Rescue Act funding:

- **Fatherhood EFFECT (Educating Fathers for Empowering Children Tomorrow)** provides parent education and resources to fathers. Beginning in fiscal year 2020, Fatherhood EFFECT's scope expanded to include community coalition and level change efforts along with local organization improvements, increasing quality direct

services targeted specifically at fathers and explicit inclusion and support of fathers across multiple programs. Services are available in Bell, Cameron, Galveston, Harris, Jefferson, McLennan, Montgomery, Taylor, and Travis counties.

- **Community Youth Development** provides services in selected ZIP code areas to promote protective factors in youth and prevent negative outcomes such as juvenile delinquency by funding local programs designed to provide an array of services such as mentoring, youth leadership development, and afterschool programs based on area needs. Services are available in Bell, Bexar, Cameron, Dallas, El Paso, Galveston, Harris, Lubbock, McLennan, Nueces, Potter, Tarrant, Taylor, Travis, Webb, and Willacy counties.
- **Texas Service Members, Veterans, and Families** is an outgrowth of the Military Families and Veterans Pilot Prevention Program intended to prevent child abuse and neglect and juvenile delinquency by enhancing protective factors of youth and families served and increasing inter-organizational collaboration in high-risk counties. The program supports military families and veterans and their families in Bell, Bexar, Coryell, El Paso, Harris, Kleberg, Lampasas, McLennan, Montgomery, Nueces, Waller, and Williamson counties.
- **Healthy Outcomes through Prevention and Early Support (HOPES)** is a flexible, community grant funding a wide variety of innovative initiatives including parent education and support services to strengthen and promote protective factors for families of children age 0 to 5 years; support safe, nurturing homes for children; and reduce the risk of child abuse and neglect across communities. Services are available in Archer, Bell, Bexar, Brazoria, Brazos, Brown, Cameron, Chambers, Clay, Coleman, Collin, Colorado, Comal, Cooke, Coryell, Dallas, Denton, Dimmit, El Paso, Ellis, Erath, Fayette, Fayette Travis, Fort Bend, Galveston, Gregg, Guadalupe, Hardin, Harris, Harris Brazoria, Harris Tarrant, Harrison, Henderson, Hood, Jefferson, Johnson, Jones, Kleberg, Lampasas, Liberty, Lubbock, Maverick, McLennan, Milam, Montgomery, Navarro, Nolan, Nueces, Orange, Palo Pinto, Parker, Potter, Randall, Rusk, San Patricio, Shackelford, Smith, Somervell, Stephens Callahan, Taylor, Upshur, Waller, and Waller counties.
- **Texas Nurse Family Partnership** is a free, voluntary program through which nurses regularly visit the homes of first-time mothers to improve prenatal care and provide one-on-one child development education and counseling. Families start services by their 28th week of pregnancy and can receive services until the child reaches age 2. Services are available in Atascosa, Bastrop, Bell, Bexar, Bosque, Brazoria, Brazos, Chambers, Comal, Coryell, Crosby, Dallas, El Paso, Falls, Floyd, Fort Bend, Galveston, Garza, Guadalupe, Hale, Hardin, Harris, Hays, Hidalgo, Hill, Hockley, Jefferson, Jim Hogg, Kendall, Kerr, Lamb, Limestone, Lubbock, Lynn, McLennan, Montgomery, Orange, Tarrant, Terry, Travis, Webb, Willacy, Williamson, Wilson, and Zapata counties.
- **Family Resource Centers** began operating in September 1, 2021, and serve as a welcoming hub of support, services, and opportunities for families that reflects community needs, culture, and interests. All PEI Family Resource Centers are required to include resource navigation in their service delivery model. Other service activities include parent education, child development education and/or screening, parent leadership opportunities, skill-based workshops, and basic needs assistance.

Family Resource Centers allow for families to engage in services at varying levels of intensity, depending on the service type. Each center is unique and responsive to their community's needs. Counties served include Bexar, Cameron, El Paso, Harris, Hidalgo, Parker, and Travis.

These PEI programs also support community-based prevention programming and are funded with state general revenue and other funding sources:

- **Family and Youth Success program**, formerly known as the Services to At-Risk Youth program, addresses family conflict and everyday struggles while promoting strong families and youth resilience. Every Family and Youth Success program provider offers one-on-one coaching or counseling with a trained professional and group-based learning for youth and parents. Family and Youth Success programs also operate a 24-hour hotline for families having urgent needs. Services are available in all Texas counties.
- **Statewide Youth Services Network** provides juvenile delinquency prevention and positive youth development for youth age 6 to 17 years old. PEI funds allow state-level grantees to identify areas of high need and vulnerability and target specific support to local communities. Statewide Youth Services Network services include school and community-based mentoring programs, such as Big Brothers Big Sisters and Texas Alliance of Boys and Girls Clubs. Services are available in most Texas counties. The level and extent of services by county varies.
- **Texas Home Visiting** is a free, voluntary program through which early childhood and health professionals regularly visit the homes of pregnant women or families with children under age 6. Through the use of evidence-based models, the program supports positive child health and development outcomes, increases family self-sufficiency, and creates communities where children and families can thrive. Texas Home Visiting also supports the coordination of local and state early childhood coalitions to build comprehensive early childhood systems. The unique Texas model utilizes both service and system-level strategies to improve broad child and family outcomes. Services are available in Bastrop, Bexar, Brazos, Cameron, Dallas, Ector, Galveston, Gregg, Harris, Harrison, Hardin, Hays, Henderson, Hidalgo, Liberty, Midland, Montgomery, Nueces, Potter, Randall, San Patricio, Smith, Starr, Tarrant, Tom Green, Travis, Victoria, Wichita, Wise, and Willacy counties.

### **Time-Limited Family Reunification Services**

CPS provides family reunification services to families immediately before and after a child returns home from an out-of-home placement, while DFPS still has legal conservatorship of the child. The purpose of reunification services is to provide support to the family and child during the child's transition from having been previously removed and living elsewhere to once again living in their parent's home. All of the following criteria must be met for a family to be eligible for family reunification services:

- At least one child has been removed from the home;
- Issues that placed the child at risk appear to be sufficiently resolved for the child to return home safely;
- Parents are working to complete goals and make behavioral changes listed on the family service plan;

- Parents have a reasonably stable living arrangement; and
- A target date has been set for the child to make their transition to the home, or the transition process has begun.

### **Adoption Promotion and Support Services**

Adoption is a permanent lifelong commitment to a child. If CPS and the family cannot resolve the safety issues that created a barrier for the child to return and live at home safely, CPS may recommend to the court that the parent-child relationship be terminated, and the child be placed with permanent families or caregivers. As a result of reducing barriers to adoption, increased collaboration with private child-placing agencies and community stakeholders, child specific recruitment activities, and supporting foster family and relative adoptions, adoption consummations continue to remain high. Consummated adoptions numbered 4,483 in fiscal year 2022 (DFPS Data Book).

Adoption recruitment efforts have further been enhanced by the Texas Adoption Resource Exchange (TARE) accessed through the DFPS website at [www.adoptchildren.org](http://www.adoptchildren.org). TARE was established to expeditiously bring together children with special needs and families who wish to adopt them. TARE services include:

- A listing of profiles and photographs of children on the TARE website;
- Online submission of inquiry forms for approved adoptive families nationwide;
- Online submission of inquiry forms for prospective foster/adopt families statewide;
- Registration of all TARE children with Children Awaiting Parents, Adoption.com, AdoptUSKids, and the local Heart Gallery, if applicable;
- A toll-free Foster Care and Adoption Inquiry Line (1-800-233-3405); and
- Promotion of the statewide exchange of adoption information.

CPS has implemented several adoption initiatives to facilitate the adoption of waiting children and decrease the time required to achieve permanency by recruiting more foster and adoptive homes. These initiatives include work on the TARE, Texas Heart Galleries, local media and outreach campaigns, regional leadership outreach, foster/adopt information meetings, the Advisory Committee on Promoting Adoption of Minority Children Adoption Forums, and the faith-based collaboration effort. CPS is partnering with AdoptUSKids on best practices for photo listing and adoption recruitment. More information on these initiatives can be found under the Foster and Adoptive Recruitment and Capacity and Recruitment sections of this report.

Annually, CPS conducts Operation PUSH (Placing Us In Safe Homes) by identifying children in DFPS conservatorship who are near adoption, but lack a few requirements for finalization (e.g., completion of home studies, legal representation for new parents, cases readied for court). Each year, a new list of children is identified, and efforts are made to complete remaining requirements to continue success of placing children in safe, permanent homes. In 2022, Operation PUSH resulted in 1,896 consummated adoptions. The current effort, Operation PUSH XIX, began in September 2022 and extends through August 2023. Regions are asked to identify dates and type of permanency achieved, including adoption, permanent managing conservatorship with permanency care assistance, and permanent managing conservatorship without permanency care

assistance for children in placements intended to be permanent. In addition to Operation PUSH, regions are asked to report on the recruitment efforts made for children in placements not intended to be permanent in order to identify needs and develop strategies to enhance recruitment.

The “Why Not Me?” campaign includes the production and distribution of English and Spanish language television and radio spots and many thousands of brochures, fact sheets, bookmarks, and other materials designed to help recruit adoptive parents. These recruitment materials were recently revamped to include new graphics and information for all new recruitment material for the “Why Not Me?” campaign.

Funded through the United States Department of Health and Human Services, Administration for Children and Families, and Children’s Bureau, the National Adoption Competency Mental Health Training Initiative (NTI) has developed two standardized, web-based trainings to build the capacity of child welfare and mental health professionals. The training is evidenced-based and free to all states, tribes, and territories. The NTI training was delivered to CPS adoption and foster/adoptive home development staff and supervisors to enhance direct delivery skills with children and youth in foster care, families preparing to foster or adopt, and children and youth and their adoptive or kinship families. This training also has a component especially for adoption supervisors to support their staff in applying new practice skills along with providing coaching and activity guides for individual or group supervision. By participating in NTI, CPS staff learn more about the skills, strategies, and tools necessary for their work in supporting children to heal from trauma and loss and parents with skills to parent more effectively, as well as improving child and family well-being to increase family stability. Implementation began in January 2021 with inclusion in a new staff training and the in- and out-of-state adoption contracts.

DFPS has an adoption assistance program to help defray some of the costs associated with adoption of a child with special needs. Program benefits include Medicaid for the adopted child, reimbursement for certain one-time expenses directly relating to completing the adoption process (e.g., non-recurring adoption expenses), and monthly payments to assist with the child's needs. The monthly adoption assistance payments are determined based upon the child's special needs and the adoptive family's circumstances.

Adopted children who have suffered abuse or neglect often need help coping with the effects of trauma, abuse, and the loss of their birth family. DFPS contracts with private agencies to provide post adoption services to adopted children and their families. After consummation of the adoption, services are provided through contracts to help the child and family adjust to the adoption, cope with any history of child abuse, and avoid permanent or long-term removal of children from the adoptive family setting. Available services include community engagement, information and referral, case management and service planning, crisis intervention, support groups, parent training, post adoption counseling, day treatment services, therapeutic or specialized camps, intermittent alternate care (respite), and residential treatment services in critical need situations.

Availability of services is dependent on funding and the individual child and family situation.

### **Division X Supplemental Funding from the Supporting Foster Youth and Families Through the Pandemic Act**

DFPS was awarded \$8,319,214.00 in emergency supplemental funding to support the activities allowable under the Mary Lee Allen Promoting Safe and Stable Families Program (PSSF). In an effort to advance community-based family support (including adoptive, foster, and extended families), family preservation, family reunification, and adoption and promotion and support services the department has contracted with the Texas Center for Child and Family Studies to distribute the supplemental funding to organizations that provide the allowable services. Specifically, the Center has been a hub for communicating this opportunity with eligible organizations, soliciting requests for funding, and reviewing those requests. Through a formal application and scoring process, the Center disbursed funds to community-based child welfare provider agencies that serve a broad cross-section of clients ranging from children to young adults, families with open Child Protective Services cases, those experiencing homelessness, victims of abuse and neglect, survivors of human trafficking, survivors of domestic violence, and foster and adoptive families.

Child Protective Services used some of the emergency supplemental funds to support additional concrete needs of kinship caregivers who are caring for children in the conservatorship of the Department.

## **F. Service Decision-Making process for Family Support Services**

- *Provide an update on the agencies and organizations selected for funding to provide family support services and how these agencies meet the requirement that family support services be community-based. CB urges states to examine where family support services are located in communities and the degree to which they are or could be made more accessible to traditionally underserved populations.*

The Texas Department of Family and Protective Services (DFPS) contracts with a variety of vendors. Current procurement opportunities are posted on:

- The Health and Human Services Open Enrollment Opportunities page at: <https://apps.hhs.texas.gov/pcs/openenrollment.cfm>
- The Electronic State Business Daily (ESBD) page at: <http://www.txsmartbuy.com/sp>.

### **PEI - Division of Prevention and Early Intervention Division**

PEI is the only unit of Texas state government statutorily charged with preventing child maltreatment and juvenile delinquency and required by rule to administer programs that achieve those goals. As required by Texas Family Code, Section 265.002, PEI plans, develops, and administers a comprehensive and unified system of prevention and early intervention services for at-risk children and their families. Per Texas Administrative Code, Title 40, Section 704.3, PEI must administer programs intended to proactively create conditions and/or personal attributes that promote the well-being of people, in order to prevent child abuse and neglect. Among the critical services PEI provides are family support services. All PEI services are voluntary and delivered by nonprofit organizations, school districts, local governments, and other community-based organizations.

To develop and administer the system described above, PEI utilizes a competitive procurement process to establish grants with community-based organizations. PEI works with the HHSC Procurement and Contracting Services to develop a request for application specifying the child abuse and neglect prevention services, including family support and service area (e.g., statewide, or certain counties based on a needs assessment). Procurement documents contain the schedule applicants must follow in submitting proposals, as well as the elements they must address in their responses in order to receive consideration, such as:

- Eligible population;
- Client service requirement;
- Service area;
- Reports; and
- Minimum staff and organizational qualifications.

Responding community-based organizations must also demonstrate knowledge of human services resources in their area, ability to network with and refer clients to those resources, and involvement with community stakeholders. Respondents must state the cost to the state for providing services. Proposals are screened to ensure minimum

requirements are met and then scored by an evaluation team. One or multiple finalists are determined based on funding available and ability to deliver services for the best value in non-duplicated proposed service area(s). Finally, agency approval is secured, and PEI staff negotiate grant details with finalists. Upon successful negotiation of terms, PEI issues a notice of award and initiates contract execution.

PEI ensures grantees effectively serve clients by monitoring their performance according to output and outcome measures. Outputs involve reaching quantitative goals (e.g., tracking the number of unduplicated clients served). Outcomes assess whether participation results in client changes. All child abuse and neglect grantees are assessed for the following two client outcomes: ability to strengthen and increase the resiliency of clients (families or youth) using the protective factors survey; and ability to keep children safe by not having any reported cases of child abuse or neglect among clients served during or immediately after receipt of services

### **CPS Direct Services**

Examples of direct services include:

- Evaluation and treatment services;
- Substance use disorder assessments and treatment (individual, family; and group counseling);
- Home study/screenings and assessment reports;
- In-state adoption;
- Out-of-state adoption;
- Supervised visitation services;
- Preparation for Adult Living; services; and
- Post adoption services.

### **Support Services**

DFPS enters into support services contracts to improve the effectiveness of direct client services and support organizations that provide indirect assistance to clients. Examples include contracts with:

- Volunteer foster parent associations and eligible councils and organizations;
- Title IV-E County child welfare services;
- Title IV-E County legal services; and
- Burial services for deceased children in DFPS managing conservatorship.

Policy and protocol for procurement is posted on the DFPS public webpage ([http://intranet/Contract/Handbook/Chapter\\_2/default.asp](http://intranet/Contract/Handbook/Chapter_2/default.asp)).

To ensure appropriate organizations are selected for funding, DFPS staff comply with specific policy and protocol. Key excerpts from DFPS contracting policy include the following.

## **Procurement Planning and Process**

DFPS relies on HHSC Procurement and Contracting Services for the procurement of agency goods and services with DFPS providing subject matter expertise for the goods and services it purchases and HHSC providing the subject matter expertise for the procurement process.

DFPS includes its Legal contract staff as in the process as an essential stakeholder in procurement planning and development.

DFPS staff must coordinate with the appropriate internal stakeholders during procurement planning and development which may include program and contract divisions; contract performance; Information Technology (IT); and Executive Leadership.

DFPS is responsible for submitting the procurement requisition. Procurement planning requires timelines to ensure a contract can be in place by the designated start date. DFPS must consider several factors to ensure enough procurement planning and development time including dollar amount, scope, type, and complexity of the procurement.

Depending on the type of procurement, external reviews may be required which will need additional time factored into the procurement planning timeline. Examples of external reviews and coordination dependent on type and scope of the procurement, include:

- **Contract Advisory Team** – Members from the Texas Comptroller of Public Accounts, the Texas Department of Information Resources, HHSC, Office of the Governor, the Texas Facilities Commission, and the Texas Department of Public Safety review and make recommendations about the procurement documents for contracts with an estimated value of \$5 million or more;
- **Quality Assurance Team** – Members from the Legislative Budget Board, the Texas Department of Information Resources, the Texas Comptroller of Public Accounts, and the State Auditor's Office are required to review major information resources purchases with an estimated value of \$10 million or more; and
- **Texas Department of Information Resources** – State agency which coordinates and supports state IT and telecommunications needs, including procurement and management of statewide cooperative contracts for IT products and services., as well as statements of work reviews required for select contract types.

Procurement planning happens in coordination with the key stakeholders in order to ensure all required elements are included, sufficient time is given to procurement development, and DFPS Legal is consulted throughout the process.

## **Determination of Need Considerations**

A determination, also referred to as a need's assessment, must be completed to justify the need before DFPS purchases goods or services. Determining the need for a contracted service is done by using a systematic approach to gather and document information about the specific components of the need.

The determination of need should achieve the following results:

- Promote a common understanding of the need to make the purchase;
- Determine the type and level of service required to meet the need;
- Determine how to measure, document, and track performance and quality of service delivery;
- Facilitate prioritization of the funding required to make the purchase; and
- Provide a formal review and approval process for committing DFPS resources to a purchase.

Services DFPS purchases may be legislatively mandated. If applicable, the mandate must be noted in the determination of need documentation.

The information gathered through the determination of need process is vital for the success of the procurement and the resulting contract(s) and serves to inform the HHSC Procurement and Contracting Services purchaser to best support and coordinate the procurement.

DFPS staff is responsible for entering the procurement requisition into CAPPs FIN 9.2 must include the information gathered through the determination of need process and should consider the following in the documentation:

- Type, intensity, and frequency of the need;
- Potential benefit to the eligible population;
- Accessibility of appropriate resources to meet the need, including cost, location, and eligibility conditions;
- Other available goods or services already purchased that may meet need;
- Appropriateness of DFPS being the primary purchaser of the service, rather than other community resources;
- Collaboration and communication with internal and external stakeholders;
- Identification of preliminary funding resources; and
- Legal issues associated with the purchase.

DFPS staff may access the following potential data resources available when documenting the determination of need:

- **Objective** – DFPS management and service data, census reports, and professional literature;
- **Statistical** – Management reporting and statistic data, IMPACT data, and data from special projects and surveys and research findings of other agencies and organizations; and
- **Subjective** – Information obtained from clients and persons working in the service area both internal and external.

### **Best Value Considerations**

DFPS must comply with best value standards when making a decision to contract for goods or services. Evaluation, determination, and documentation requirements for best value differ based on the procurement method.

DFPS staff is responsible for working with HHSC Procurement and Contracting Services and DFPS Legal, program and contract divisions in documenting requirements regarding the determination of need and best value factors.

Factors used to determine best value may vary depending on the procurement method. For competitive procurements, these factors must be included in the solicitation. In addition to purchase price and whether the goods or services meet the specifications of the solicitation, other relevant factors to consider include, but are not limited to:

- Installation costs;
- Total life cycle costs;
- Quality and reliability of the goods and services;
- Delivery terms;
- Vendors past performance, experience, ability to perform, and financial resources;
- Cost of employee training associated with the purchase;
- Effect of the purchase on DFPS productivity; and
- Vendor's anticipated economic impact to the state (i.e. potential tax revenue and employment).

## G. Populations at Greatest Risk of Maltreatment

- *Provide an update noting any changes or emerging trends in the populations the state has identified as at greatest risk of maltreatment and how services will be targeted to these populations during the coming year.*

DFPS utilizes a suite of assessment tools during investigation and ongoing services to assess the risk and safety of children. The risk assessment classifies families according to the level of risk for recurrence of abuse and/or neglect. This allows DFPS to direct resources toward the families most in need of services. DFPS has employed a number of strategies designed to target this population as well as other children at risk:

- Child safety specialists review investigations involving children aged 0 to 3 years in multiple referral cases and cases with victim children age 0 to 3 years when the risk level is high or very high or the safety finding is anything other than safe and the family is not being referred for services beyond investigation. Child safety specialists may also consult on high-risk cases in investigation and alternative response to ensure child safety.
- In fiscal year 2022, PEI published a five-year strategic plan shaped by input from hundreds of community stakeholders, researchers, advocates, and staff. The strategic plan further reflects DFPS' shift from primarily investigation-based efforts aimed at protecting children to including a public health approach aimed at strengthening families. The plan includes seven high-level goals with strategies, actions, and measures of success for each. Utilizing tools such as community needs assessments, evaluation data, and evidence-based practices validated across the country, PEI ensures funding and other resources go to the communities and populations that need them most and are spent for services that will make a difference. This strategy ensures the highest level of impact for areas of highest need.
- The 85<sup>th</sup> Texas Legislature provided additional funding for prevention programs focused on early supports for families, including expanding nurse home visiting specifically for first time parents and home visiting for high-risk families with prior CPS interventions. New HOPES III contracts were awarded for nine counties to provide services and build collaborative, sustainable and innovative family support systems that include a family service coalition, as well as evidence-based or promising practice services to strengthen families with children aged 0 to 5 years of age. In fiscal year 2018, new contracts for the Texas Home Visiting, STAR, and Community Youth Development programs were executed. In fiscal year 2020, procurements and services for the HOPES program, fatherhood engagement, and services for high-risk parenting were launched with services tailored to meet the specific needs in each community. PEI coordinated four community grant opportunities in fiscal year 2021; including procurements for the Texas Nurse Family Partnership, Community Youth Development, and HOPES programs. PEI is also piloting the use of Family Resource Centers with existing HOPES and Family and Youth Success Program providers. In fiscal year 2022, PEI completed procurements for the Texas Home Visiting program and Statewide Youth Services Network to expand services for both early childhood home visiting and youth-serving programs across Texas. In fiscal year 2022, a new procurement was published to execute updated grants in fiscal year 2023 for the

Family and Youth Success Program (formerly STAR) program that will help provide services in all 254 Texas counties. PEI continues to offer an array of services through these various programs to help support high risk families. This includes serving specialized populations such as families with children aged 0 to 5years, fathers, military-connected families, formal and informal kinship families, those with prior child welfare involvement, youth, and youth who are pregnant or parenting.

- The Texas Legislature required DFPS to develop a growth strategy to gradually increase the number of families receiving PEI services each year. In response, PEI partnered with the University of Texas Health Science System to develop a series of tools utilizing risk mapping and geographically based risk and resiliency models to assist DFPS in developing growth strategies focused on how to allocate resources within communities of need. The university provided information and analysis to help PEI understand where programs and investments will need to grow to meet the needs of communities at high risk for maltreatment. In September 2021, updated the community maltreatment risk maps (<https://www.maltreatment-risk.txsafebabies.org>) were released to help more effectively allocate resources and provide support to communities with the highest need to help families before they are in crisis.
- Project HIP (Helping through Intervention and Prevention) provides home-visiting services to a narrow set of high-risk families who have a newborn and prior CPS history, or when a youth in DFPS conservatorship is pregnant or parenting.

DFPS continues to provide ongoing services to these targeted populations at risk of maltreatment and work upstream to support children and families in their community through partnership with other state agencies, local service providers, and community-based supports. With overall outcomes based on the prevention of child maltreatment and strengthening of family resiliency, these collaborations are designed to address the needs of parents while also ensuring the growth and support needed for each child in the family

## H. Kinship Navigator Funding

*In the 2024 APSR provide an update on:*

- *How the kinship navigator program is being implemented (directly or under contract to a third party).*
- *How the state has used FY 2023 funds to implement or evaluate its kinship navigator program.*
- *How kinship caregivers are made aware of kinship navigator programs and resources (e.g., through a kinship navigator hotline and/or resource website); and*
- *The accomplishments achieved with use of the funds appropriated in fiscal FYs 2018 – 2023 to develop, enhance, expand or evaluate kinship navigator programs in the state, including, if available, any estimate of families served in the previous year.*
- *Information on the state's plans for participating in the title IV-E kinship navigator program.*

Since receiving the kinship navigator grant funding in September 2018, DFPS has used a portion of the funds to partner and contract with the University of Houston Graduate College of Social Work to examine the necessary infrastructure to support and sustain a kinship navigator program in Texas, as well as the projected costs to implement and sustain the program.

With the information obtained from research in fiscal years 2018 and 2019, DFPS partnered with HHSC 2-1-1 to enhance the support 2-1-1 provides kinship caregivers. Funding was used to strengthen the 2-1-1 infrastructure (e.g., equipment and security), allowing for continued service to kinship related calls. Additionally, training was procured and developed for roughly 250 call specialists who are responsible for handling inquires to the call center to enhance cultural competency of call specialists serving kinship caregivers.

In fiscal year 2023, DFPS continued to partner with HHSC to enhance the 2-1-1 system to better support kinship caregivers. A portion of the kinship navigator funds was used for 2-1-1 to complete a customized needs assessment and data analysis on kinship care callers to 2-1-1 and develop a custom contact form for this caller population. The specialized kinship contact form was built to capture additional data elements based on DFPS research and programmatic needs to foster the development of expanded navigation systems for kinship care callers. The data was analyzed and included in a report developed to assist DFPS in assessing kinship caregiver needs across the state.

PEI used a portion of the kinship navigator funds to award four kinship navigator planning grants to conduct 12 months of planning activity including assessing and planning for implementation of a holistic kinship navigator program with service components to help prepare for program implementation and evaluation. This planning included ongoing state level planning activities around the capacity, infrastructure, and resources, as well as supports needed to successfully expand services to kinship caregivers throughout the state. This portion of the grant funding was renewed for fiscal year 2023 to continue implementation efforts for the Kinship Navigator project. At this time, the four grantees

are implementing their perspective kinship navigator programs in four separate Texas geographical.

A portion of the kinship navigator grant funds was used to evaluate the Harris County Protective Services Family Navigation program. The family navigators are staff members lived experiences interacting with DFPS and other parts of the child welfare system. In addition, the program allows kinship families to access trauma-informed psychiatric and mental health therapies through its integrated healthcare services and mental health therapy programs. The *Kinship Family Navigator Program Outcome Evaluation Report* was completed early in fiscal year 2022. The program did see successes in reducing both the stress and health needs of caregivers (as this program's primary intention was to meet the needs/stabilization of the caregiver); however, limited post-program surveys and data made it difficult to assess its effects on children and youth returning to care post-Kinship Family Navigation Program involvement. The assessment did yield positive results regarding connecting kinship caregivers to both concrete goods, such as help with decision-making, emotional support, diapers, clothing, furniture, and gift cards; and service referrals, such as childcare, medical/mental health care, and public benefits. Its evaluation information will inform DFPS' plan for potential future use of a Kinship Navigator program in Texas. Specific to the needs of such a program in the Houston area (Harris County), the report included recommendations for future inclusion in Family First Prevention Services Act (FFPSA) Kinship Navigator programs. Like many other assessments, the COVID-19 pandemic did have an impact on this evaluation, as most caregiver contact was limited to virtual, offering its own limitations and hinderances.

Beginning September 1, 2021, a portion of the kinship navigator grant funding was used by DFPS and Single Source Continuum Contractors (SSCCs) which have reached Stage II for direct kinship caregiver support. In fiscal Year 2023 there were \$531,202 in Kinship Navigator Grant Funding that were used to help kinship caregivers. These funds have been utilized to assist current kinship caregivers engaged in the DFPS process who are pursuing verification as a foster or adoptive home and needed assistance with the expenditures required for the verification process. Additionally, these funds have been utilized for the expansion of concrete services to kinship caregivers, providing an increase in the maximum annual assistance for basic needs assistance from \$200 per annum to up to \$1,000 dollars to better support kinship caregivers. If the family's need was greater than \$1000, then a secondary approver could be sought to assist with that need.

In state fiscal year 2022, the Texas Kinship Navigator pilot facilitated more than 16,624 interactions with kinship families and community members.

This includes:

- 7,365 individuals through community awareness events;
- 5,555 individuals through family community activities;
- 2,416 individuals through outreach programs;
- 627 individuals through trainings, seminars, and conferences;
- 262 in Kinship Navigator/formal coordination services

- 62 caregivers engaging in parent leadership/caregiver advisory boards; and
- Approximately 20 kinship caregivers participating in support groups per month.

Texas continues the evaluation to assess kinship navigator outcomes in order to identify the best model for a Texas Kinship Navigator Program. The Center for Violence Prevention (CVP) at the University of Texas Medical Branch (UTMB) is conducting a multi-year, mixed methods, process, implementation, and outcome evaluation of the community-based Texas Kinship Navigator Program pilot sites that are funded through DFPS Prevention and Early Intervention (PEI).

## I. Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

Describe:

- *How the Monthly Caseworker Visit Grant has been used in the past year to improve the quality of caseworker visits; and*
- *Continued action steps to ensure that statutory performance standards are met. If the state has missed previous performance standards, describe the reasons the state's performance has fallen short and the steps the agency will take to ensure compliance.*
- *As applicable, information on policies, procedures, or training to support quality virtual caseworker visits to ensure children and youth's privacy and safety when in-person visits are not able to be safely conducted.*
- *The total number of visits made by caseworkers on a monthly basis to children in foster care during a fiscal year must not be less than 95 percent of the total number of such visits that would occur if each child were visited once every month while in care.*
- *At least 50 percent of the total number of monthly visits made by caseworkers to children in foster care during a fiscal year must occur in the child's residence.*

See [ACYF-CB-PI-12-01](#) for more information on monthly caseworker visit performance standards and data requirements.

### Monthly Casework Visit Formula Grants and Standards for Caseworker Visits

The federal statute required states to collect and report the following data on caseworker visits:

- The percentage of children in foster care under the responsibility of the state who were visited monthly by the caseworker handling the case of the child or by the DFPS contractor who provides out-of-state visitation responsibility (supervision); and
- The percentage of the visits occurring in the residence of the child.

### Monthly Caseworker Visit Formula Grants

**Child and Family Services Improvement and Innovation Act, P.L. 112-34** revised the purpose for the use of Title IV-B, Subpart 2 formula grants provided to state agencies for monthly caseworker visits. Federal law now specifies state agencies must use monthly caseworker visit funding to improve the quality of caseworker visits with an emphasis on improving caseworker decision-making on the safety, permanency, and well-being of foster children and caseworker recruitment, retention, and training (section 436(b)(4)(B)(i) of the Act). States must indicate any changes planned for the use of monthly caseworker visits funds to comply with new requirements.

**Per ACYF-CB-PI 12-01**, states are to use the following formula to calculate compliance: For federal fiscal year 2015 and each federal fiscal year thereafter, the total number of visits made by caseworkers on a monthly basis to children in foster care during a fiscal year must not be less than 95 percent of the total number of such visits that would occur if each child were visited once every month while in care.

The following methods and resources are being used to continue to achieve the monthly caseworker visit target:

- Local permanency specialists are local conservatorship caseworkers permanently assigned to children in DFPS conservatorship when the child is placed outside of their home region. Assignment of a local permanency specialist increases the ability to have frequent contact with this population. Portions of these positions are paid for by the Monthly Caseworker Visit Grant.
- Interstate Compact for Placement of Children CPS policy requires children placed out --of-state be visited once a month. Interstate Compact for Placement of Children supervision reports are sent to DFPS on a quarterly basis.
- Mobile technology, specifically tablet personal computers, enables caseworkers to document visits with children in a timely manner.
- Accountability tools such as data warehouse reports allow supervisors weekly and monthly monitoring of caseworker progress required monthly visits. The Performance Management Initiative establishes individual and program accountability by identifying key measures of performance and establishing benchmarks for each measure. It also ensures accountability, oversight from management and good casework. Employee and program performance are tied to corrective action.
- Leadership development is an investment in staff development and retention that ensures CPS has the workforce it needs to serve children and families. Components of this effort focus on outcomes and using data to achieve these outcomes.
- Statewide master conservatorship caseworker positions were created to deploy to areas with high caseloads, typically due to high worker turnover, to ensure casework services continue to those children in care.

### **Documentation of Monthly Visits**

DFPS employs the IMPACT web-based system as the Statewide Automated Child Welfare Information System. DFPS caseworkers utilize IMPACT to document their casework decisions and actions at all stages of the case including intake, investigation, risk assessment, case management, eligibility, and resource management. The IMPACT system allows caseworkers to choose from a menu of 12 different locations for the contact including residence, foster home, hospital, and facility. Data from the IMPACT system is reported to the United States Department of Health and Human Services twice yearly for federal AFCARS compliance.

DFPS currently produces weekly and monthly reports detailing the number and percentage of in-person contacts for children in conservatorship in open substitute care stages in accordance with ACYF-CB-PI-12-01: Data requirements for States related to reporting monthly caseworker visits under Title IV-B. The reports are utilized by caseworkers and managers to assess progress in meeting the monthly visitation and timely documentation goals., CPS has developed the tracking and reporting system for sharing results with United States Department of Health and Human Services.

### **State Standards for the Content and Frequency of Caseworker Visits**

DFPS currently has requirements for monthly in-person visits in the CPS Handbook. The current policies are summarized below.

The worker or the DFPS contractor who provides visitation responsibility (i.e., supervision) must see the child in person at least once a month at the caregiver's residence or facility on a majority of the visits. The visits must be well planned and focused on issues pertinent to case planning and service delivery to ensure the safety, permanency, and well-being of the child.

To prepare for a monthly visit with a child the worker should:

- Review the current version of the child's service plan for the services in place for the child;
- Review the case record for any outstanding medical or dental exams, psychological reports, report cards, or other critical documents;
- Contact service providers to discuss progress in the case, if appropriate;
- Review any other notes or materials necessary to be familiar with the child's current needs and situation; and
- Review any information that the worker may need to provide to the caregiver or request from the caregiver.

The visit must include quality time with the child separate from the caregiver if the child is verbal. If the child is nonverbal, the caseworker interacts with the child and observes the caregiver's interaction with the child.

If the worker is visiting with a sibling group placed together, the worker must spend time with each child, individually and alone separate from the child's siblings, as well as the child and their siblings together.

During the visit with the child, the child's worker must address and assess safety, permanency, and well-being. This may include asking about and discussing with the child:

- What has happened since the last visit;
- Contacts held with parents, siblings, and others if contact is approved in the case plan;
- Child's thoughts and feelings about living with the caregiver and being away from home;
- Child's understanding of why they are in care and remain in care;
- Child's interactions with other children in the home;
- Child's progress in school;
- Child's health, growth, and development;
- Child's racial and ethnic identity development;
- Services provided;
- Status of the case;
- Child's opinion of their service plan; and
- Youth's opinion of their plans for transitioning to a successful adulthood, if the youth is 14 years of age or older.

The caseworker must keep the child informed about the child's overall progress in substitute care and allow the child to express their needs and feelings about the situation.

The worker also must help the child prepare reunification with their family or transition to another permanent living situation if family reunification has been ruled out.

The worker must also do a physical walk-through of the child's foster or kinship home and backyard when doing the monthly visit at the residence to observe the environment in which the child is living.

Conservatorship caseworkers have tablet computers and technology allowing them to enter contacts into IMPACT system while mobile. The worker documents contacts made during the monthly visit in the IMPACT system within 24 hours of any visit with a child.

### **Out-of-State Placements**

CPS Handbook, Section 6418 contains the policy for supervision of Texas children in DFPS conservatorship in substitute care placed in other states under the Interstate Compact on the Placement of Children. The policy outlines documentation requirements, supervision services expected from other states, and steps to request placement in a residential treatment center outside of Texas.

### **Progress to Date**

DFPS has taken a series of steps to increase the number of caseworkers in-person contacts with children in substitute care. All conservatorship workers have tablet computers, further assisting their ability to efficiently manage time needed for documentation and increase in-person time with the children on their caseload. The tablet computers allow staff to document their in-person contacts in IMPACT.

DFPS continues monitoring performance through weekly and monthly in-person contact reports and promotes the importance of caseworkers visiting children on their caseloads at a minimum of once per month, with the majority of the visits occurring in the child's home, at every statewide leadership meeting, through monthly statewide scan calls with state and regional leadership and individualized regional data warehouse reports to regional leadership via e-mail from the DFPS Federal and Program Improvement Review division. This continues to have positive results.

For fiscal year 2022, caseworker in-person contact with children was 98.9 percent (Data Warehouse report sa\_42) with the majority of those visits occurring in the child's residence being at 92.2 percent (Data Warehouse report sa\_45). For fiscal year 2023 as of February 2023, caseworker in-person contact with children is at 98.7 percent with the majority of those visits occurring in the child's residence being at 92.6 percent.

### **Include updates on staff development plans paid for by the caseworker visit funding (section 436(b)(4) of the Act), which may include activities designed to improve caseworker retention, recruitment, training, and access to technology.**

In fiscal years 2019 and 2020, DFPS offered an engagement video series to caseworkers with guidance on the best ways to build engagement with children, youth, and families. A fathers' engagement video series and tip sheet were also provided to assist caseworkers in working with and engaging fathers and their children. DFPS resumed in-person staff

meetings in fiscal year 2022 and continues to have conferences yearly with leadership and staff focusing on engagement and quality visits with children and families. DFPS will continue to use the Monthly Caseworker Visits Grant to develop trainings and supports to improve in-person visits, delivered to staff as needed and based upon the needs identified within the year.

In March 2020, with the declaration of state and federal emergency circumstances related to COVID-19, DFPS implemented the use of “virtual visits” to protect public health. In-person visits resumed statewide in May 2020 except in limited circumstances, such as children with primary medical needs. Concerns regarding known COVID-19 symptoms or infections continue to be monitored. Surveys are routinely monitored and if positivity reaches a certain threshold in a facility, visits revert back to virtual until positivity rates decline. DFPS has not adopted any additional virtual visit or alternative visit methods in FY 2023. Except in those limited COVID-19 exposure situations in facilities, all monthly caseworker visits are required to be face-to-face and in-person.

In June 2021, an enhanced CPS professional development curriculum was released, including a total of 13 weeks of training for new staff. For two of the 16 days of in-class training, the curriculum solely focuses on assessing, addressing, and documenting the needs of children in conservatorship, including the basic components of visiting children, engagement, assessing for safety, permanency and well-being through quality contacts, and trauma informed interventions. Updates to the individualized training plan for staff in all stages of service were also implemented during this time period. In addition to the requirement for new staff to participate in child interviews and home visits throughout the nine weeks of field training, the employee reviews the *Conservatorship Safety Visit Resource Guide* and observes and documents the process of an in-person child visit through a guided observation task. The requirement includes focus on the timeliness of these visits and the quality of the contact during the interaction.

In December 2021, CPS and CPI released a new training for supervisors, *Foundations of CPI/CPS Supervision*, which is offered in month one of their promotions into the position. The training offers 180 minutes of content focused on effective use of data in managing their teams and includes the use of data warehouse reports and the Insight tool. These applications allow supervisors to view relevant data pertaining to visit contact and services offered to children in care. These tools provide information on contacts and critical tasks and allow both supervisors and caseworkers an opportunity to better manage their workloads and timeframes, including in-person contact with children. Tip sheets for the Data Warehouse and Insight are also provided for managers in each stage of service, for ongoing reference and use in maintaining requirements in these critical areas. This curriculum is reviewed regularly to ensure information is relevant and properly prepares supervisors to ensure their staff maintain policy standards in all areas, including monthly contact with children.

With the theme of “Creating Cultural Change through Connection and Collaboration”, the fiscal year 2023 Leadership Retreat scheduled for August 22-24, 2023, will focus on the

importance of engagement and relationship building, providing creative and innovative ideas and opportunities for connection during the conference. Initiating this dialogue with CPS leaders and providing them with the tools and techniques to affect real connection, CPS hopes to promote parallel processing, where front line staff will use similar methods with the children and families they encounter in their daily interactions. The retreat participants will include program directors and above, SSCC agency leadership, and the CPS State Office team. The ultimate goal is to provide staff with the knowledge and skill to ensure quality visits with children and their caregivers, where honest conversations are frequent, accountability is upheld, and positive change is celebrated.

## J. Adoption and Legal Guardianship Payments

*Describe:*

- *How Adoption and Legal Guardianship Incentive Payment funds received by the state have been used in the past year and the services the state expects to provide to children and families using the Adoption and Legal Guardianship Incentive funds in FY 2024.*
- *Any changes, issues, or challenges the state has encountered to the plan outlined in the 2021-2025 CFSP and subsequent APSRs for timely expenditure of the funds within the 36-month expenditure period*

The FFY 2022 Adoption and Legal Guardianship Incentive Payment grant, fund a portion of expenditures for providing purchased services to treat children who have been abused or neglected, to enhance the safety and well-being of children at risk of abuse and neglect, and to enable families to provide safe and nurturing home environments for their children.

DFPS plans to utilize future funds during SFY 2024 as a portion of the funding for Child Protective Services (CPS) Other Purchased Services. Should the grant award increase and as needs are identified, DFPS may also utilize funding for Purchased Adoption Services, and CPS Direct Delivery Staff activities.

Purchased adoption services is where DFPS contracts with child placing agencies to perform the functions necessary for the adoption placement and post adoption placement supervision of children in DFPS conservatorship. Other CPS purchased services are those Title IV-B allowable services provided to children and families such as evaluation and treatment services. CPS direct delivery staff activities include salary and travel for staff who perform direct casework with children in the custody (conservatorship) of the State that leads to family reunification or other permanency goals such as adoption.

DFPS has had no difficulties expending these funds in a timely manner previously and does not foresee any future changes, issues, or challenges.

## **K. Adoption Savings Expenditures**

- *Provide an update to the services the state provided to children and families using the Adoption Savings since the submission of the 2024 APSR.*
- *If needed, provide an update to the services the state expects to provide to children and families using the Adoption Savings over the next year.*
- *Provide an estimated timetable for spending unused savings calculated for previous years.*
- *Discuss any challenges in accessing and spending the funds.*

The state expects to use Adoption Savings on Protective Day Care, Post Adoption Client Services, Post-Permanency Purchased Service, Domestic Violence Services, Client Services for Family Preservation, Foster Care Assistance Payments, Adoption Assistance Payments, Guardianship Assistance Services, and Prevention and Early Intervention Services such as Family and Youth Success Program (FAYS) and CYD (Community Youth Development).

Based on appropriated funds the agency historically spent anywhere from 40% to 75% of the savings earned each year including unused savings from previous years. Any challenges our Agency has are attributable to the non-supplementation requirement as our appropriations grow each Fiscal Year. This can be compounded as the savings continue to increase as the eligible population expands. DFPS has been unable to spend accumulated savings for the past two years due to how the agency was appropriated funds in conjunction with the non-supplantation requirement. The agency anticipates further challenges in spending the savings in the current year due to similar issues.

## L. Family First Prevention Services Act Transition Grants

*Report the following information on the use of FFPSA Transition Grants:*

- *If applicable, how FFPSA Transition Grant funds have been used to implement each part of FFPSA, with a separate statement with respect to each such part;*
- *All programs, services, and operational costs for which the grant has been used;*
- *The characteristics of the families and children served;*

*If the state has not yet used any funds, please provide information on the planned use of funds.*

In September 2020, DFPS released its FFPSA Strategic Plan which included several options for the 87th Texas Legislature to consider how to best move forward with FFPSA implementation in the state when it convened in January 2021. All of these options meet the intent of the Family First Transition Act (FFTA) Transition Grant funds. The 87th Texas Legislature provided DFPS guidance on FFPSA activities and the utilization of FFTA funding.

Additionally, as a part of the FFPSA Strategic Plan and utilization of a portion of the state's FFTA Transition Grant, DFPS outlined a high-level implementation plan for a Qualified Residential Treatment Program (QRTP) pilot, as well as necessary changes to the state's case management system to support the funding components inherent in FFPSA by the end of September 2021.

FFPSA Transition Grant funds were utilized to implement the following parts of FFPSA:

- **FFPSA: Foster Care Prevention Services and Programs, Section 50722:** DFPS and the Office of Community-Based Care Transition Services began an effort to pilot evidence-based interventions as determined through the FFPSA Clearinghouse in areas of the state where Community-Based Care is underway. On March 18, 2022, DFPS released a grant funding opportunity for current SSCCs to apply for participation in the pilot project.

DFPS executed contract amendments with four SSCC as of August 31, 2022. FFTA funds currently support the purchase of services, as well as dedicated staff positions to support implementation and oversight efforts.

The 2012-22 General Appropriations Act, Senate Bill 1, 87th Legislature, Regular Session, 2021 (Article II, DFPS Rider 48[c]), directed DFPS to use a portion of FFTA funds for the Nurse Family Partnership program to expand capacity as allowed by FFPSA. PEI finalized contract updates to incorporate additional funds into eight nurse family partnership contracts to serve pregnant and parenting youth in foster care. All eight sites began hiring and recruiting eligible families immediately. PEI also added mental health consultation services to the contract with the Nurse Family Partnership National Service Office to better support Nurse Family Partnership sites providing services to pregnant and parenting youth in foster care.

FFTA funds were used to purchase consultative services from Texas A&M University to analyze and provide recommended financial model implementation options for purchasing family-based safety services as a part of Community-Based Care. This study of implementation options was completed and submitted to the Office of the Governor and Texas legislative leadership on October 1, 2022.

Rider 48(e) also directed DFPS to use a portion of FFTA funds to support the transition of family-based safety services to evidenced-based programs under FFPSA. PEI added capacity to existing evidence-based programs to serve a portion of families in family-based safety services and identified SafeCare and Parents as Teachers as the most appropriate FFPSA-approved evidence-based models for this project.

DFPS is working on an open enrollment opportunity to enhance a service that would provide additional funding to support the room and board of children in DFPS conservatorship who can stay with their mother in inpatient residential substance used treatment. DFPS hopes to execute contracts to begin in fiscal year 2024.

- **FFPSA: Limitation on Federal Financial Participation for Placements that are not in Foster Family Homes, Section 50741:** DFPS began an IT project in October 2020 to make enhancements to the Statewide Automated Child Welfare Information System necessary to ensure foster care maintenance payments for children in congregate care placements are paid in accordance with FFPSA Title IV-E claiming rules. These IT changes went live on September 29, 2021.
- **FFPSA: Assessment and Documentation of the Need for Placement in a QRTP, Section 50742:** CPS has four dedicated positions to support the development of the Texas-specific QRTP model. Hired in March 2021, two QRTP program specialists are working on development and procurement documents, program model, communication, training needs, and workgroups necessary to create and implement the QRTP pilot. These subject matter experts have worked to ensure all requirements for QRTP under FFPSA are met. Two additional positions have been provided to support placement and eligibility activities. These positions were hired, trained and ready to serve the first youth by the end of June 2022. The positions are responsible for drafting policy, best practice guides, and placement and court forms to support this program. The positions also provide technical assistance to staff, providers and other stakeholders to support the QRTP pilot implementation.

The QRTP Open Enrollment Procurement documents and all required supplemental documents were published on April 1, 2022. Providers were allowed a minimum of 30 days to review and provide their response.

During the months of May and June 2022, DFPS completed internal trainings and informational webinars for DFPS caseworkers, as well as external trainings and informational webinars for legal stakeholders and providers. DFPS launched both internal and external QRTP webpages on June 30, 2022.

In July 2022, DFPS prepared amendments to the open enrollment to clarify contract terms to better solicit potential ORTP providers to meet the needs of the targeted population of children and youth. These amendments were posted on September 2, 2022. All open enrollment information, documents, and supplementals are posted on the Electronic State Business Daily site at: <https://www.txsmartbuy.com/esbddetails/view/HHS0011971>.

Currently, three QRTP provider contracts are pending. Two are located within SSCCs areas, and one is located within a legacy contract area. DFPS will be handling the QRTP contracts during an initial pilot phase of approximately 12 to 18 months.

DFPS developed the QRTP pilot procurement in conjunction with HHSC. DFPS met the goal of readiness to serve the first youth by the end of June 2022. FFTA Transition Grants funding was used to support the staff positions to serve as the subject matter experts on the Texas QRTP model, as well as direct the implementation of the pilot. These four staff positions are responsible for:

- Coordinating development and implementation with internal and external stakeholders;
- Guiding the development of a FFPSA-compliant service delivery model that meets the needs of the children in DFPS conservatorship; and
- Providing guidance on establishing state policies and procedures required to implement the program.

The Texas QRTP pilot model and implementation development has included workgroups with the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families; the Texas Alliance for Children and Family Services; residential providers; other legal stakeholders; Youth for Tomorrow; and DFPS program and field, contracts, finance, Center for Learning & Organizational Excellence, IT, and Data Analysis and Support staff.

The QRTP team has also completed procurement activities to release request for application procurement type to extend a limited number of accreditation grants to existing licensed and in-process operations to support accreditation and incentivize QRTP contracts. DFPS allotted \$1.5 million toward these grants and planned to issue multiple awards. The request for application was published on August 24, 2022, with award selection occurring in December 2022. Currently, four award contracts are pending execution. At the closure of the current request for application, DFPS plans to create an additional request for application procurement type to extend the accreditation grant opportunity and expend the remaining funds. DFPS will utilize FFTA funds for the pilot.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section VII. Chafee and ETV**

**A. Chafee Foster Care Independence Program (CFCIP)**

**B. Education and Training Vouchers Program (ETV)**

**Texas Department of Family and Protective Services  
ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## VII. Chafee and ETV

### A. Foster Care Independence Program (CFCIP)

- *Provide an update on the state’s activities to collaborate with and solicit feedback from diverse groups of youth and young adults about their service needs and desired outcomes for the Chafee programs (both on the individual and system level). Include information learned from Youth Advisory Boards, town halls, virtual forums, and other state activities. Provide an overview of how the information collected was used to inform service delivery and how the agency has provided feedback to participating youth/ young adults on the impact of their input.*
- *Briefly describe the services provided since the submission of the 2023 APSR, highlighting any changes or additions in services or program design for FY 2023 and how the services assisted or will assist in achieving program goals. Indicate how these activities have been integrated into the state’s continuum of services and align with the state’s vision.*
- *Division X Additional Funding from the Supporting Foster Youth and Families Through the Pandemic Act.*
  - *Provide the final update on how the agency used the additional funding provided by Division X.*
  - *Describe accomplishments in using this supplemental funding to assist young people, including available quantitative information on the numbers of youth/ young adults assisted, the amount of funding provided for direct assistance to young people, and available information on the characteristics and demographics of youth assisted.*
  - *Describe any challenges or barriers the state has experienced in being able to use the additional Chafee funds.*
  - *Describe any lessons learned that may inform future provision of services under the Chafee program.*
- *Provide an update on the state’s actions and plans to strengthen the collection of high-quality data through NYTD and integrate these efforts into the state’s quality assurance system.*
- *Provide an update on how the state involves the public and private sectors in helping youth in foster care achieve independence.*
- *Provide information on the services to support LGBTQI+ youth/ young adults. Include information on appropriate activities and activities specific to the needs of individual youth in care, such as LGBTQI+ youth. Include information on partnerships with community organizations or resources to support resources to LGBTQI+ youth and young adults.*
- *Provide an update on coordinating services with “other federal and state programs for youth (especially transitional living programs funded under Part B of Title III of the Juvenile Justice and Delinquency Prevention Act of 1974), abstinence education programs, local housing programs, programs for disabled youth (especially sheltered workshops), and school-to-work programs offered by high schools or local workforce*

agencies.”

- *Provide information on the actions taken to address the housing needs of young adults in transition from foster care. Outline the federal, state, local, and public/private resources utilized to support a range of safe, affordable, and age-appropriate housing options for young people.*
- *As part of the update on the coordination of Chafee services with other federal and state programs, provide information on the state’s efforts to support and facilitate the coordination of child welfare agencies and Public Housing Authorities (PHAs) to utilize FYI vouchers, including any relevant data. Identify any barriers or challenges in working with the PHA to utilize FYI vouchers in their state.*
- *Provide an update on how the state is supporting and reaching out to youth and young adults in or formerly in foster care to promote wellness and proactively address mental health needs.*
- *Provide information on the title IV-B/IV-E agency’s efforts to coordinate with the state’s Medicaid agency to support the state’s implementation of requirements to offer Medicaid to eligible young adults formerly in foster care who move to a new state after January 1, 2023.*
- *Discuss efforts to provide youth formerly in foster care in your state with information and resources to support their enrollment in Medicaid in the case that they move to another state. This could include providing to youth/young adults access to documents, websites, contact information or other resources to facilitate enrollment. Effective outreach efforts also include marketing information to supportive adults and providers who work with eligible young people.*

The Texas Department of Family and Protective Services (DFPS) provides Chafee Foster Care Independence and state-paid program services and benefits on a statewide basis through its Transitional Living Services Program, which incorporates Preparation for Adult Living , Education and Training Vouchers , and other related services in support of youth starting at age 14 up to 22 and 23 years old in some cases who are currently or formerly in foster care or transitioning out of care to a successful adulthood. In addition, a life skills assessment is provided to youth in permanent managing conservatorship at age 14. Other services are provided as funding or resources are available to 14- and 15-year-old youth.

Transitional Living Services are provided on a statewide basis by DFPS staff, contracted service providers, or through available community resources such as transition centers across Texas. Each DFPS region offers Transitional Living Services and events to youth and young adults. This plan addresses the eight broad program purposes of the Chafee Foster Care Independence Program. With the passage of the Family First Prevention Services Act (FFPSA), P.L. 115-123, (HR 1892), DFPS continues to explore the feasibility of increasing the age of eligibility for Education and Training Vouchers from 23 to 25. Due to the passage of the Supporting Foster Youth and Families through the Pandemic Act, P.L.116-260, (HR 133” the age of eligibility was extended to 25 from September 2021 through September 30, 2022, as funds were available. In addition to the age expansion, the pandemic relief bill also extended the maximum allowed award per academic school year from \$5,000 to \$12,000 through September 30, 2022. After September 30, 2022, the

eligibility age returned to 23 and the maximum award resumed to up to \$5,000 per academic school year for Education and Training Vouchers services.

DFPS uses objective criteria to determine eligibility for benefits and services which includes information such as age, legal status, the completion of training for the transitional living allowance, funding availability, and available resources. In addition, DFPS considers the individual needs of youth to ensure fair and equitable treatment. For example, all youth and young adults who meet the eligibility criteria for the Education and Training Voucher are awarded up to \$5,000 per academic school year based on the institution of higher education's cost of attendance the student attends.

DFPS uses data available on a national and state level to determine service needs as part of continuous quality improvement efforts. Data captured in the DFPS data system, such as for the National Youth in Transition Database (NYTD) collection, is used to make this determination. Through this, DFPS tracks outcomes in important areas and there are comparisons drawn to the starting point from previous cohorts. For example, after a comparison of 17-year-old survey responses from Cohort 1 (fiscal year 2020) to Cohort 1 (fiscal year 2017), it was determined there was improved starting point in most areas with the exception of experiences of homelessness. As a result, DFPS is working on ways to improve in this area and created a State Office housing specialist position to work toward improved housing outcomes. DFPS continues to work on memorandums of understanding (MOUs) with local housing authorities to provide the regions with assistance on United States Department of Housing and Urban Development (HUD) voucher applications. To date there are MOUs with 35 public housing authorities for the provision of Foster Youth to Independence housing vouchers, and a further 19 MOUs related to Family Unification Program housing vouchers. These MOUs are present in every region.

Regions provide information in annual reports outlining the type and number of services provided, accomplishments, challenges, and collaborations. Data from these reports is used in this Chafee plan. For example, the data for teen conferences and aging-out seminars, in addition to youth evaluation results, are reviewed and discussed by regional staff and state office to determine if services should be modified to ensure youth are receiving the needed services to prepare them for their successful transition to adult living. As a result of feedback and data, the aging-out seminar materials and process are being updated to ensure youth receive more experiential activities and to ensure more youth attend the seminars.

The general objective of the DFPS Transitional Living Services program is to implement a systemic and integrated approach in transition planning and services affecting youth beginning at age 14 in DFPS conservatorship that improves outcomes for youth and young adults. The program is without regard as to whether the youth is placed with a parent/guardian, was emancipated by a court order while in DFPS conservatorship, aged out of DFPS conservatorship (regardless of whether placed with a parent/guardian at the time they aged-out of care at 18), or is a young adult enrolled in or exiting the DFPS extended foster care program. The Transitional Living Services team includes a youth

employment specialist and youth housing specialist. These positions implement programs and community partnerships that improve employment and housing outcomes for youth and young adults formerly in foster care.

The Transitional Living Services program is comprehensive and includes:

- Experiential Life Skills Training;
- Planning for a Successful Adulthood and Circles of Support
- Permanency planning for older youth;
- Provision of personal documents for youth before ages 16 and 18;
- Credit reports for youth;
- Driver license and state identification card fee waivers;
- Community engagement and collaborations;
- Youth Engagement and Youth Leadership Councils;
- Employment Services for Youth and Young Adults with Special Needs;
- Preparation for Adult Living Program;
- Aging-out seminars at age 17;
- Transition and financial support services for young adults aged out of care until age 21;
- Data collection for the National Youth in Transition Database;
- Annual Higher Education Data Report of Foster Care Students;
- Tuition and fee waivers;
- Education and Training Voucher Program;
- DFPS scholarships;
- Transition centers;
- Collaborations with colleges and universities;
- Partnerships with local workforce boards and centers;
- Extended Foster Care Program;
- Supervised Independent Living Placement Options for Extended Foster Care;
- Trial Independence Period and return capability for Extended Foster Care;
- Housing options through the 811 Project Rental Agreement Program, Family Unification Program and Foster Youth to Independence Program;
- Former Foster Care Children Program (Medicaid Coverage) for Young Adults ages 18 through 25;
- Information about temporary housing assistance between academic terms; and
- Youth Take Flight Instagram page.

Four principles guide the DFPS Transitional Living Services Programs:

1. Engage young people in all aspects of the work;
2. Engage the community to build and strengthen community partnerships;
3. Collaborate to improve systems, programs, and services; and
4. Collect and evaluate data, document what works, and communicate the results.

**1. Support all youth who have experienced foster care at age 14 or older in their transition to adulthood through transitional services such as assistance in obtaining a high school diploma and post-secondary education, career exploration, vocational training, job placement and retention, training and**

**opportunities to practice daily living skills (such as financial literacy training and driving instruction), substance abuse prevention, and preventative health activities (including smoking avoidance, nutrition education, and pregnancy prevention).**

### **Opportunities to Practice Daily Living Skills**

Foster parents and other residential providers are required to include training in daily living skills through practical activities such as meal preparation, nutrition education and cooking, use of public transportation when appropriate, financial literacy training to include money management, credit history, preparing a monthly budget, and balancing a bank account, learning about insurance, the process to register to vote, performing basic household tasks, and other areas developmentally appropriate for youth age 14 and older.

If the youth have a source of income, the provider must assist the youth in establishing a savings account. Foster parents and caregivers must connect youth and young adults to community resources such as post-secondary education; employment opportunities; and vocational/technical school opportunities. The youth's opportunities to practice daily living skills while in foster care and the receipt of Preparation for Adult Living services should complement one another and are discussed and addressed in each core life skill area within the Child's Plan of Service. Foster parents receive training on normalcy from their child-placing agency to understand their role in allowing youth to participate in normalcy activities, such as going on outings with friends, going on dates, taking a driver's education course, participating in extracurricular activities, etc. Updates have been made to the *Residential Requirements Guide* to strengthen the experiential life skills requirement and normalcy activity language and includes an updated link to the DFPS website of recently updated resources to aid foster care providers with access to web-based information about life skills and normalcy activities.

### **Planning for a Successful Adulthood and Circles of Support**

DFPS uses a personalized transition planning process that builds on a youth's strengths, assessments, supports, and current service planning needs. The Child's Plan of Service is used to identify what supports or services are needed to accomplish goals for transitioning to a successful adulthood. It includes any "caring adults" who make up the youth's support system which can include family. The Child's Plan of Service addresses housing, Medicaid/insurance coverage, mental health and medication management, strengths, and challenges, employment, secondary and post-secondary education, mentoring opportunities, continuing support services, workforce supports and employment services, as well as addresses immigration/citizenship needs, personal identification documents, and normalcy activities.

The transition plan is part of the Child's Plan of Service and helps to ensure all youth are receiving the services they need to meet their unique needs. The Circle of Support and Child's Plan of Service include dedicated sections on the youth's hopes and dreams, strengths, talents and abilities, fears and concerns, educational, housing and employment goals, finances, physical and mental health including medications, and emotional well-being. Planning for the youth's transition to a successful adulthood – regardless of

permanency plan – begins at age 14, with more detailed sections used starting at age 16. The Child’s Plan of Service is a living document where progress is tracked as needed and at regular intervals over time by the youth, the caregiver, and the youth’s caring and supportive adults including family, professionals such as the youth’s attorney or volunteer advocate, and DFPS. All students receiving special education services in public schools begin transition planning at age 14, as directed by state and federal laws. DFPS, school staff, and the student may collaborate in developing the student’s unique transition plan. Sections of the Child’s Plan of Service address special needs for youth with intellectual and developmental disabilities or immigration needs, and ensure all youth leave care with important personal documents they need, such as a certified or original birth certificate, Social Security card, and state/personal identification cards. The Child’s Plan of Service information is accessible to the youth and those caring/supportive adults the youth choose. It also includes normalcy activities that the youth is currently participating in as well as any activities the youth would like to be involved in. There are no restrictions to a youth participating in particular normalcy activities unless they are specifically excluded and documented in the Child’s Plan of Service.

Circles of Support are youth-driven/focused meetings based on the family group decision-making philosophy and are offered to youth beginning at age 16 though a Circle of Support. These can also be held as early as 14, when needed. They enable youth to develop or update a plan for moving from care to successful adulthood regardless of permanency plan and connecting with supportive and caring adults who can help the youth after the youth leaves care.

Circles of Support operate in all regions in the state and are facilitated meetings with participants youth identify as “caring adults” who make up their support system and professionals with subject matter expertise (e.g., a developmental disability specialist for a youth with an intellectual or developmental disability). Circle of Support participants can be the youth’s family members including family of origin, substitute care providers, teachers, relatives, church members, mentors, and others. These participants come together to develop and review the youth’s specific plans for transitioning to a successful adulthood and other relevant sections of the Child’s Plan of Service, including all Preparation for Adult Living life skills training components.

Each caring adult participant identifies a personal way to help support the youth’s transition to successful adulthood and the youth’s efforts to attain short- and long-term goals toward self-sufficiency. The caring adult signs the Child’s Plan of Service to seal the agreement. If a youth declines to participate in a Circle of Support or the Circle of Support cannot be convened, plans for transitioning to successful adulthood are reviewed at a regularly scheduled review meeting of the Child’s Plan of Service. A Circle of Support is the preferred method for developing and reviewing the youth’s plans for youth who are age 16 and older.

DFPS uses data to track what percentage of eligible youth have participated in a Circle of Support and gathers information to determine capacity for holding Circles of Support. This information is used to determine if adjustments need to be made to ensure that DFPS

is providing Circles of Support to as many eligible youths as possible.

### **Permanency Planning for Older Youth**

For youth 14 years and older in DFPS conservatorship or voluntary extended foster care, DFPS uses Circles of Support for permanency planning whenever possible. This allows the youth to be an active participant in their permanency planning and aids in the preparation of the youth when they transition from care. To strengthen achieving permanency for this population, all permanency planning meetings include discussing permanency options that could be explored prior to the youth turning age 18. Youth identify current connections to caring adults and any potential family or kinship relationships they would like to explore for placement and permanency. This includes relational permanency for when a caring adult will support the youth after they turn 18 but cannot be a placement option. In fiscal year 2021, the National Youth in Transition Database results from a random sample of 21-year-old young adults who took the survey at age 17 reflected that 87 percent reported having a current connection to an adult.

The Child's Plan of Service includes exploration of barriers to permanency and all possible permanency options. The DFPS goal is to achieve positive permanency for all youth in conservatorship, regardless of age. To achieve permanency, case planning including setting concurrent permanency goals is done collaboratively to identify the appropriate permanency goal(s) for a youth and determine a course of action to achieve permanency. Assessments of youth address specific behavioral, emotional, cultural, therapeutic, educational, physical, or medical issues/conditions that have been identified and would help clarify current needs, identify a plan of treatment, or rule out the need for further services. In some cases, a psychological or psychiatric evaluation might be required for a placement or might be requested by the courts. All youth have a Child and Adolescent Needs and Strengths (CANS) assessment conducted upon entering DFPS foster care and at least annually thereafter.

### **Personal Documents for Youth Before Ages 16 and 18**

Before a youth turns 16 and again before the youth exits care at 18 or older (unless the young adult already has the document), youth must be provided copies and originals (or certified copies in place of the original) of certain personal documents to assist them in gaining employment, enrolling in school, leasing an apartment, opening a bank account, setting up utility services, getting a driver's license and accessing other resources.

A youth in DFPS conservatorship on or before the date the youth turn age 16 must be provided with a photocopy and original document (or certified copy in place of the original) of the youth's:

- Birth certificate;
- Social Security card or replacement Social Security card, as appropriate; and
- Personal identification card issued by the Texas Department of Public Safety (DPS).

A youth who is discharged from DFPS foster care and is age 18 or legally emancipated will receive a photocopy and original/certified personal documents (if not already provided) and other information. These include:

- A birth certificate;
- A Social Security card or a replacement Social Security card;
- A personal state identification card issued by DPS;
- Immunization records;
- Information contained in the youth's Health Passport;
- Medicaid card or other proof of the youth's enrollment in Medicaid or an insurance card from a health plan that provides health coverage to youth in foster care;
- Medical Power of Attorney Information-Forms 2559 A and B; and
- "Almost 18" Letter.

DFPS updated policy in February 2023 to ensure each youth 14 years of age or older has an email address through which the youth may receive encrypted copies of personal documents and records. Also already required, the caseworker will assist the youth with developing a plan for keeping the documents in a safe place and providing information to the youth about the documents they are required to receive before the date the youth transitions from foster care.

### **Youth Transition Portfolio**

As part of a youth's transition to adulthood at age 18, DFPS ensures the youth is provided with a Youth Transition Portfolio at least 90 days before the youth turns 18. The Youth Transition Portfolio includes personal documents, education records, credit reports, Health Passport records, an updated version of the youth's transition plan (Child's Plan of Service) document, and other information.

Former youth who lose or misplace their personal identification documents can request copies of these documents which are stored in a separate section from the case records for easy accessibility by the Records Management Group (RMG). Caseworkers send personal documents through a separate system to be stored and made available to youth at least 30 days before leaving care. Upon request by the young adult, these records will be sent securely through an encrypted email to the young adult's personal email or will be mailed or faxed to them. Instructions are provided to the young adults regarding email server security access to encrypted documents. RGM developed a form young adults can submit to request copies of personal documents. This information is shared with the Preparation for Adult Living staff, Child Protective Services (CPS) caseworkers, providers, and other stakeholders.

### **Credit Reports**

Youth 14 to 18 years old are notified by caseworkers that their consumer credit report is run annually until discharged from DFPS care. In September 2022, DFPS compiled personal youth data from the DFPS IMPACT system by each region. This data was later formatted to required specifications and used to request batch files of consumer credit reports from each of the credit reporting agencies. Individual reports may be requested by the caseworker if there is suspicion of fraudulent credit activity, by a court order, or if the youth came into DFPS conservatorship at age 17 or older. In addition to ensuring the youth is notified a credit report has been run, the caseworker is also required to document this information in the case files, explain the credit report, and convey the importance of

maintaining good credit and correcting any inaccuracies in the report. Agreements with the three credit reporting agencies allow credit reports to be run for youth who are still in DFPS conservatorship. Young adults in extended foster care are provided with instructions, information, and assistance on how to access their own credit reports.

For fiscal year 2022, DFPS processed credit report files with Equifax, Transunion, and Experian for 11 regions regarding 3,705 youth ages 14 to 18. The batch files processed for all three agencies totaled 11,115 files. According to current progress analysis there are 16 youth whose files contained credit discrepancies or 0.43 percent of total files run and analyzed thus far. Each agency requires specific documents (birth certificate, Social Security card, and custody orders) be submitted for each report with a discrepancy. Providing a report ensures youth are protected from fraudulent and inaccurate information on their credit reports. A consumer credit report exists only if the youth have credit activity, with a credit account opened using the youth's Social Security number. General (soft) inquiries or address changes do not create a credit history.

Youth should understand how to interpret a consumer credit report and the importance of maintaining accurate information in their consumer credit report. Youth who participate in Preparation for Adult Living life skills training classes attend a financial management class and learn about credit, its importance, and how to interpret credit reports. CPS continues to seek video training resources for both caseworkers and youth who will easily explain how to read and interpret credit reports. General credit report information is shared on the Youth Take Flight Instagram page.

### **Driver License and Texas Identification Fee Waivers**

Texas driver license and identification card fees are waived for youth in DFPS conservatorship and young adults ages 18 to 21 who reside in a paid foster care placement, as long as there are available funds collected by the DPS via donations. When these funds are not available, DFPS resources are used or the caseworker/caregiver/youth seek funding from local resources, such as child welfare boards.

DFPS and other community stakeholders meet on a regular basis to discuss barriers and solutions to youth obtaining their driver license. Recent legislation requires the Texas Workforce Commission upon request to pay for fees and costs from the DPS fee exemption account associated with driver education and safety courses and driver license exams for youth currently or formerly in foster care or who are homeless and meet certain criteria. This program is schedule to start in Fall 2023.

### **Community Engagement**

DFPS Preparation for Adult Living program staff and contractors collaborate statewide with community organizations to help youth make the transition to self-sufficiency. DFPS regions contract or partner with community entities to provide transitional living and Preparation for Adult Living services to youth and young adults aged 14 to 21. A life skills assessment is provided to youth in permanent managing conservatorship starting at age 14. Other services are provided as funding or resources are available to youth 14 and 15

years old. Transition centers are one of the many community organizations DFPS staff use for transitional living services.

Preparation for Adult Living services use other community resources to assist youth and young adults in developing skills to help with their transition to a successful adulthood. Preparation for Adult Living staff provide information, assistance, and presentations to staff, as well as new caseworkers in training, community groups, foster parents, and tenured caseworkers.

Involving community partners is integral in assisting former youth in their transition to self-sufficiency. DFPS works closely with the regional community engagement specialists to ensure outreach and engagement with local organizations and other community resources will raise awareness of the needs of youth and young adults in care. Community engagement specialists (in some instances with the Preparation for Adult Living staff) provide presentations about the tuition fee waiver and other resources available to the 140 Community Resource Coordination Groups in Texas as needed. Regions have provided back-to-school, prom, graduation, and holiday celebrations for youth and young adults with help from community partners.

The State Office Transitional Living Services Program, Youth housing specialist and youth employment specialist positions duties are aimed at improving outcomes for former foster youth. These positions help to develop, implement, and monitor projects and programs associated with increasing employment and housing opportunities. The youth employment specialist duties include partnering with vocational and rehabilitation services, local workforce solutions boards, transition centers, and other community partners to enhance employment options. The housing specialist works with local housing authorities and other community resources to secure housing vouchers and other housing support and resources.

### **Collaborations to include Other Private and Public Agencies including youth**

Transitional Living Services program staff engage youth and young adults, CPS staff, community partners, service providers, private and public agencies, foster parents, higher education, and other stakeholders in program and policy improvements, as part of the systemic and integrated approach to transition planning and services affecting youth and young adults. DFPS collaborates with the purpose of helping youth in foster care achieve independence by 1) participating on regional and statewide workgroups including public and private agencies; 2) inviting input from public and private sector agencies and people on policy, protocol and practices; and 3) providing information to private and public agencies as requested. Examples of collaboration with public and private agencies include participation on: 1) driver license, state identification card, and documents workgroup led by Texas Court Appointed Special Advocate (CASA) with the goal of easing requirements and fees for youth to obtain their essential documents; 2) Career Development and Education Program, Foster Care and Education, Education Reach for Texans workgroups with the goal of improving education outcomes and making state resources known; 3) Summer Internship with Workforce Solutions for North Central Texas with the goal of providing youth with useful job skills; and 4) other related workgroups. Regional youth

specialists and the Youth Leadership Council provide guidance, information, and advocacy supports to regional Youth Leadership Councils and policy and decision makers.

DFPS collaborates with Texas Network of Youth Services, Texas Alliance of Child, and Family Services (TACFS), Education Reach for Texans, the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (Children's Commission), DFPS youth at regional and statewide Youth Councils, field staff, and other external partners to get feedback from diverse groups and former foster youth on meeting the needs of Chafee eligible Texans.

### **Human Trafficking**

DFPS utilizes resources such as Traffick 911, the Central Texas Coalition Against Human Trafficking, and Mosaic Family Services to educate youth about human trafficking and its dangers during Youth Take Flight for Success Seminars, Preparation for Adult Living life skills classes, and workshops at the Texas Teen Conference. Additionally, DFPS compiled information for youth and staff about the risks of human trafficking and how to access needed help. This information is posted on the DFPS website and periodically posted to the Youth Take Flight Instagram page. The 2023 Texas Teen Conference will have a session regarding human trafficking.

Further, trainings surrounding human trafficking are now required of casework staff. New caseworkers are required to complete Foundations of Human Trafficking training upon hire and annually thereafter. Existing caseworkers take the course annually.

### **Youth with Other Needs**

DFPS has been working in collaboration with advocates to explore evidenced-based practices to enhance positive permanency outcomes based on the unique needs of children and youth while providing CPS staff the tools they need to support these youth's individual and diverse needs. Through their websites, CPS continues to offer resources and information on diversity to better serve the needs of these youth and young adults.

Although the Residential Child Care contracts require residential providers to transport youth or young adults to life skills training classes, youth leadership council meetings, aging-out seminars and Texas Workforce Centers, transportation continues to be an issue. DFPS staff arranging these activities who experience difficulty with providers transporting the youth are advised to report transportation issues to the residential contract manager for resolution. Residential providers are reminded of the transportation provisions in their contracts and the requirement that youth have access to community vocational technical training programs, volunteer opportunities, and workforce services. Providers were also reminded to encourage youth to actively participate in Preparation for Adult Living events such as Bridge Summer Camp, other appropriate camps, Teen Conference, college tours, Youth Take Flight for Success Seminars, and regional youth leadership councils. They are further encouraged to contact the regional Preparation for Adult Living staff if a presentation to providers is needed about transitional living services. Unlike earlier years, fiscal year 2023 saw the return of many events cancelled during the COVID-19 pandemic, although several events have been modified and were offered

virtually. The Statewide Youth Leadership Conference was held June 6-8, 2022, in Austin. The Preparation for Adult Living Career and Technical College Conference was July 14-15, 2022, at Austin Community College in Austin. Youth also enjoyed the Bridge Camp in Waxahachie August 8-10, 2022. The Preparation for Adult Living College Conference was held March 9-10, 2023, at the University of Houston in Houston. Planned statewide conferences remaining for 2023 include the Texas Teen Conference scheduled for July 12-14, 2023, at the University of Texas at Austin in Austin, and PEAKS camp will be held July 24-27, 2023, in New Braunfels.

DFPS provides LGBTQI resource information to youth and young adults individually, during Preparation for Adult Living training classes and conferences and through other community resources. Workshops have been provided at the statewide Teen Conference related to diversity and LGBTQI. The STAR Health program provides LGBTQI resource information in their *Transitioning Youth Program Community Resource Guide*. During the Preparation for Adult Living Life Skills Training Life Decisions and Responsibilities Core Element, youth are provided with social service agencies and resources offered in their community, including references for LGBTQI organizations and how to access services.

### **Secondary Education**

DFPS staff collaborates with the Children's Commission, the Texas Education Agency, the Texas Association of School Boards, and other state and local agencies. The Post-Secondary Education and Transition committee identified areas which contribute to a youth's more successful entry into the workforce: gaining training through a certificate program; transition planning mirrored by DFPS and the high school counselors; high school students in foster care enrolling in dual credit or early college start classes; and encouraging assessments for general work skills, aptitude, and interests.

DFPS collaborates with agencies and programs that serve youth and young adults receiving special education services. Additionally, DFPS staff collaborates with community groups and service providers such as Communities in Schools, college vocational programs, Goodwill training programs, Texas Workforce Commission Vocational Rehabilitation Services, the Texas Education Agency, and transition centers. DFPS regional education specialists continue to develop regional consortiums to identify and facilitate services for youth in care. DFPS and health and human services agencies meet with local school administrators, school counselors, and special education directors to discuss DFPS policy, education, or school issues. Community groups, including other care providers, private therapy providers, foster care family groups, and faith-based organizations also participate in these consortium meetings. DFPS education specialists work with CASA volunteers and community groups to advocate for educational services for children in care.

All students in DFPS conservatorship have an education decision-maker named to make education-related decisions. A form identifies the student's caregiver, caseworker, and education decision-maker. Students who receive special education services have a surrogate parent named to make decisions on special education issues. The names of the education decision-maker and surrogate parent must be filed with the court and

named parties within five days of the adversary hearing, as well as with any change in the education decision-maker or surrogate parent. School districts are required to designate a foster care liaison who is responsible for enrolling and securing school records in a timely manner for students in care. The Texas Education Agency has funded a state level position dedicated to improving the educational outcomes for youth in care.

The federal Every Student Succeeds Act directs local school districts to work with foster childcare systems to ensure children and youth in foster care remain in their school of origin, unless it is not in the child's best interest. DFPS staff make every effort to identify an appropriate placement which meets the education needs of the student and allows the student to attend the same school they attended at the time of placement. The school district and DFPS collaborate and make transportation plans for the student, as appropriate. If placement is not possible in the school of origin, DFPS staff are directed to seek a placement within the student's same school district.

Some state initiatives added specific rules to the Texas Education Code and direct schools to enhance services to students in care. Every school district must name a foster care liaison to facilitate enrollment and services to students in foster care. The duties of a foster care liaison are to advocate for the needs of students in foster care. Coordinate with various school personnel and departments to ensure the required supports, practices, and best practice strategies for serving students in foster care are implemented within the local schools. Services include timely records transfer (within 10 days), course completion for graduation requirements, post-secondary assistance and services, excused school absences for requirements in a child's service plan, awarding partial credit for coursework completed prior to a student's placement and school changes. All students must have a personal graduation plan by the time the student enters ninth grade or enters a new secondary school setting. The personal graduation plan is prepared by the student, school counselor, and parent and is reviewed and updated at least annually. State law also requires Texas public colleges, universities, and state technical schools to designate a foster care liaison to provide services, facilitate student enrollment, and resolve multiple issues post-foster care students may experience. Local schools are required to hold enrollment conferences within the first two weeks of enrollment at a new school. Enrollment conference is a student-centered meeting for a newly enrolled student designated to:

- Identify academic and extracurricular interest;
- Introduce school processes and opportunities for engagement;
- Develop course and instructional strategies;
- Review credits and assessment information;
- Determine social-emotional support; and
- Communicate confidential information that may impact a student's success, if needed.

Services include assistance with Education Training Vouchers, financial aid, housing, student employment, transportation, and priority in class selections. The Texas Education Agency worked with DFPS to expand the capability to collect and share specific data on students in foster care.

DFPS continues to work with Texas Education Agency, the Children's Commission, and the Texas Association of School Boards on a shared commitment to improving the educational outcomes for children and youth in care. DFPS participates in several state- and community-level working committees to identify barriers to providing seamless education services to children in care. DFPS regional education specialists have completed presentations on ensuring education stability for students in care through education service centers, local school districts, CASA, child-placing agencies, and community organizations. Each DFPS region operates at least three community consortia which include community and post-secondary education stakeholders, local family court judges, youth, school administrators, and DFPS staff. Consortia meet at least quarterly to identify and resolve barriers to students in foster care. The Meadows Center at the University of Texas at Austin has developed professional development trainings and webinars for teachers working with students in care and sponsored statewide workgroups to implement changes in working with students in care and developing best practices.

DFPS faces challenges to meeting the educational needs and goals of youth in care. Limited information exists from schools about vocational and technical training opportunities for students who would prefer to learn a marketable job skill and not pursue a two- or four-year college degree. Other challenges include facilitating school enrollment and transfers; maintaining educational stability; resolving transportation related issues for students in rural communities; and using data-driven evidence to develop best practices in the provision of services. DFPS staff continue to coordinate with caregivers to help interested students enroll in workforce services provided by the workforce advocate in transition centers or workforce solutions offices to explore career opportunities and the training and education needed to pursue identified careers

Students with disabilities have post-secondary programs available in seven colleges and universities. DFPS regional education specialists provide caseworkers with program information.

DFPS education specialists and caseworkers participate in school transition planning with youth, beginning at age 14. Students are encouraged to explore careers through job shadowing, career days, and internships. DFPS caseworkers and school counselors share information on transition services available for eligible students in foster care through community resources. School counselors are required by state law to review the DFPS Education and Training Voucher program and the college tuition waiver with each student in foster care and enrolled in their school district.

DFPS provides additional resources to internal and external stakeholders on transition services for youth and young adults in care. The DFPS education program offers quarterly newsletters with current school and community resources to school administrators, foster care liaisons at local schools and colleges, and community colleges, as well as to 20 regional education service centers, service providers, and community resources. The education program also provides monthly webinars available for free and open to the public on various topics, such as transition services for students in foster care and receiving special education services, multiple resources for students in foster care from

the Texas Workforce Commission, Education and Training Voucher training, and Preparing for an Admission, Review, and Dismissal (ARD) meeting (includes Social Security, housing, medical, transportation, and Texas Workforce Commission representatives).

The College for All Texans website allows youth to select a Texas school, plan for costs, complete school applications, and apply for financial aid. Privately owned career schools and colleges offer classroom or online training to teach the skills needed to perform a particular job.

The Texas Workforce Commission licenses career schools and colleges that offer programs where students can receive certificates for various skills trainings and provides information and technical assistance to schools, students, and the public. DFPS works with the Texas Workforce Commission to obtain services available to youth interested in pursuing specific career paths. The Texas Workforce Commission offers regular presentations on post-secondary career options available to students in foster care to school counselors, statewide DFPS/CPS consortia meetings with community stakeholders, and training to foster care liaisons at the school and college level. Vocational rehabilitation services through the Texas Workforce Commission collaborate with the Texas A&M University Rellis Program to explore and offer more certificate and training programs that will lead to gainful employment for youth currently or formerly in foster care. One example is their six-week commercial driver license program.

The most recent National Youth in Transition Database results available (federal fiscal year 2021) indicated 62 percent from a random sample of 21-year-old young adults who took the survey at age 17 reported finishing high school or obtaining a general educational development (GED) certification.

### **Post-Secondary Education**

Education Reach for Texans is a 501(c)(3) group of current educators and administrators from several Texas colleges and universities who partner with DFPS staff to provide support, technical assistance, and advocacy for youth formerly in youth care and enrolled within higher education institutions. This group convenes annually at different campuses in Texas, bringing together other colleges, universities, advocates, stakeholders, caregivers, youth, and DFPS staff. The <sup>annual</sup> conference was held April 3-4, 2023, at Texas State University in San Marcos.

The Education Reach for Texans group focuses on using existing student support ~~services~~ to assist youth currently and formerly in care with their academic efforts, navigate the school's system, and help improve educational outcomes. One of the primary barriers to effectively supporting these students is being able to identify the students so outreach efforts can occur. Some schools work with the financial aid office when students submit the tuition and fee waiver exemption to identify the students. DFPS works with Education Reach for Texans to encourage more Texas colleges and universities to participate and develop student support services to serve youth formerly in care enrolled in Texas colleges and universities.

The Texas Higher Education Coordinating Board added an additional question to identify youth in DFPS conservatorship on or after age 14 to the Apply Texas application used to apply to Texas colleges and universities.

The Education and Training Voucher Program, the Texas college tuition and fee waiver, and two DFPS scholarships are available for youth and young adults pursuing higher education. These programs and scholarships are promoted at conferences, events, life skills classes, and aging-out seminars attended by youth and young adults. Each youth and young adult are encouraged to utilize all financial benefits available to them.

The Children's Commission facilitates the Foster Care Post-Secondary Education workgroup with membership consisting of former foster youth, colleges and universities, Preparation for Adult Living staff and providers, CASA, the Texas Education Agency, the Texas Higher Education Coordinating Board, and legal advocates. The workgroup created a comprehensive resource guide for college foster care student liaisons, high school counselors, caseworkers, caregivers, and students. It identified an online tool that provides a one-stop resource of helpful links to CPS programs and other important information for students formerly in foster care and identify available data to track post-secondary outcomes of youth and young adults in foster care. The workgroup meets quarterly to discuss objectives, collaborate to find solutions, and develop resources. In fiscal year 2023, the workgroup is collaborating on creating caregiver resources to support youth and young adults in their pursuit of post-secondary education.

The workgroup began a series of webinars aimed at informing and training foster care liaisons, high school counselors, and other educational advocates on benefits, services, and resources available to current and former foster youth. Webinars have been aimed at informing and equipping the secondary education and school district foster care liaisons across the state to better assist foster youth in pursuing post-secondary options and benefits and provide the same support to post-secondary faculty, including financial aid and admissions, as well as foster care liaisons.

The Texas Legislature directed all public community colleges, junior colleges, and four-year colleges to designate a foster care liaison to assist former foster care students transitioning from high school to college. The list of college liaisons is maintained by the Texas Higher Education Coordinating Board and is posted on the College for All Texans webpage.

The most recent National Youth in Transition Database results available (federal fiscal year 2021) indicate 92 percent of the random sample of 21-year-old young adults who took the survey at age 17 are currently enrolled in and attending high school, GED classes, post-high school vocational training, or college.

### **Secondary and Post-Secondary**

DFPS established a workgroup comprised of representatives from the Texas Education Agency, transition centers, post-secondary institutions of higher learning, vocational

college, foster care alumni, and other stakeholders. Workgroup meetings were held October 14, 2022, and December 15, 2022. The next meeting will be held Summer 2023 to discuss organizational updates, changes to programming, proposed solutions; and actions to take by agencies to strengthen policies and practice. DFPS posted and periodically updates information about the Career Development and Education Program on the DFPS website under Transitional Living Services, as requested by the workgroup after identifying the need for one central location of career and education resources.

### **Transition Centers**

There are 18 independently operated, one-stop transition centers across Texas with at least one in each DFPS region. Transition centers are a central clearinghouse for community partners to serve the diverse needs of older youth ages 15.5 to 25 years who have or are aging out of care. The centers provide services such as Preparation for Adult Living life skills training classes, job readiness, career preparation, summer youth employment programs, job search classes, youth leadership trainings, activities, and mentoring. Transition centers may partner with substance use and mental health counseling providers and local housing authorities. Centers are located in Abilene, Amarillo, Austin, Beaumont, Belton, Corpus Christi, Dallas, El Paso, Fort Worth, Harlingen, Houston, Kerrville, Killeen, Longview, Lubbock, McAllen, San Angelo, San Antonio, and Tyler.

The Texas Workforce Commission financially supports workforce advocate positions in all 18 transition centers with a goal of improving employment outcomes for youth currently and formerly in care and helping develop a comprehensive long-term career path. DFPS supports transition centers at the state and local levels and encourages the expansion and sustainability of transition centers, including referencing transition center as models for best practices. DFPS does not fund transition centers, although some of the transition center operators' contract with DFPS to provide Preparation for Adult Living services.

### **Mental and Physical Health**

The DFPS Transitional Living Services team addresses empowerment and normalization when preparing youth to age-out of care by seeking input from youth currently and formerly in foster care and providing technical assistance to create opportunities for normalcy in placement settings. The most significant challenges are a lack of resources, behavioral health services, and providers in both rural and urban communities. Enhancements by STAR Health have emphasized youth and young adult's empowerment in well-being appointments, such as a well woman's annual exam or dental check-up. An online application is available for smart phones or computers which promotes meeting health care needs.

DFPS provides information about wellness and mental health resources through Preparation for Adult Living life skills training classes during the health and safety core element which includes personal health care, substance abuse, sexual responsibility and coping, and stress management, in addition to a life decisions and responsibilities core element emphasizing community resources and awareness. DFPS provides information about wellness and mental health during statewide and regional conferences and events.

Regional PAL staff hold Aging Out Seminars which include required discussions of healthy sexuality, identifying and dealing with cyberbullying, healthy and unhealthy relationships, and understanding nutrition. DFPS promotes and solicits feedback about wellness and mental health during statewide and regional Youth Leadership Council meetings. DFPS holds an annual Physical and Environmental Activities for Knowledge and Skills (PEAKS) camp for youth in care which provides normalcy opportunities, enhance feelings of self-worth, build relationship skills, and discover their strengths. DFPS regularly posts resource information and messages related to wellness and mental health on the Youth Take Flight Instagram page and DFPS website.

### **Preparation for Adult Living Services and Data**

DFPS continues to review policies and procedures related to Chafee-funded services to determine how services meet the needs of youth and young adults statewide. As contracts are procured, opportunities become available to ensure DFPS is providing quality services that meet the needs of the youth and young adults. Contractors are required to meet certain performance measures tied to outcomes. DFPS is available to cooperate with any national evaluations on the effects of the programs in the achieving the purposes of Chafee Foster Care Independence Program. DFPS will provide requested information and be available to respond to questions related to a national evaluation.

Current Chafee services provided statewide by the Preparation for Adult Living Program include the following:

- **Life Skills Assessment** ([www.caseylifeskills.org](http://www.caseylifeskills.org)) starting at age 14 for youth in permanent managing conservatorship and age 16 for any youth in foster care to assess the strengths and needs in life skills attainment. Caregivers provide input on the youth's assessment and are invited to an interpretation of the youth assessment results;
- **Life Skills Training classes** (age 16 to 18 years) **and *Independent Study Guide*** in the following core elements: health and safety, housing and transportation, job readiness, financial management, life decisions and responsibilities and personal and social relationships;
- **Transition and Financial Support Services** (Aftercare Case Management in Region 6) to assist with self-sufficiency planning and resource coordination and help address youth expenses, such as graduation expenses, tutoring, driver's education fees, mentoring; normalcy activities, and some transition costs;
- **Transitional Living Allowance** of up to \$1,000 for initial adult living start-up costs (distributed in increments of up to \$500 per month) for young adults up to age 21 who meet the DFPS criteria, including participating in life skills training and living in a DFPS- or Medicaid-paid placement within the 24 months before the allowance is initiated; and
- **Aftercare Room and Board Assistance** (age 18 to 21 years) of up to \$500 per month adult living for rent, utilities, utility deposits, food (not to exceed \$3,000 of accumulated payments per young adult).

Youth and young adults who are potentially eligible for statewide services include those who:

- Are at least 16 and in DFPS conservatorship;
  - ▶ Were emancipated by a court order while in DFPS conservatorship (up to age 21);
  - ▶ Aged-out of DFPS conservatorship at age 18 (up to age 21); and
  - ▶ Are enrolled and/or exited in the DFPS Extended Foster Care Program (up to age 21).

Youth who are placed in foster care in a Title IV-E placement by the Texas Juvenile Justice Department or a county juvenile probation department are eligible for Preparation for Adult Living life skills training if they are age 16 to 17, receiving Title IV-E foster care maintenance payments, and will stay in that placement until they turn age 18. Such youth may also be eligible for Preparation for Adult Living aftercare room and board payments and case management.

In fiscal year 2022, 6,002 youth and young adults received services through the Preparation for Adult Living Program, including 642 youth aged 14 to 15. This is a decrease for the same population during the prior year. This could have to do with increased permanency efforts or the decreased general population of youth in DFPS conservatorship. In fiscal year 2022, 1,087 youth exited DFPS conservatorship through emancipation.

Life skills training is part of a continuum of learning youth in care receive starting at age 14. Foster parents and residential providers are required to include training in experiential life skills by providing an opportunity to practice daily living skills, such as grocery shopping, meal preparation and cooking, use of public transportation, financial literacy, and performing basic household tasks. The resource guides and *Residential Requirements Guide* include enhancements to experiential life skills and normalcy activity requirements in the youth's placement. The *Residential Requirements Guide* will be updated in 2023 to reflect new legislative requirements related to the documents the youth is required to receive prior to being discharged from foster care and how those documents may be used.

The Casey Life Skills Assessment is provided to youth prior to the start of life skills training classes. Caregivers are asked to complete the assessment on the individual youth in their care so that a comparison can be generated which includes both the youth and caregiver responses. The individual youth report is used when caregiver responses are not available. Youth and their caregivers or residential providers are invited to the interpretation of the completed life skills assessment results and are provided copies of the scored assessment. During the interpretation the youth's strengths and needs are discussed. The youth's caseworker receives a copy of the report and incorporates specific service needs into the Child's Plan of Service from the assessment. Preparation for Adult Living staff determined that in fiscal year 2022, 1,238 Casey Life Skills Assessments were completed. Texas Family Code, Section 264.121 requires DFPS to conduct an independent living skills assessment for youth in DFPS permanent managing conservatorship who are age 14 or 15. If a youth was not eligible to receive the assessment at age 14 or 15, an assessment will be provided to all youth in DFPS conservatorship at age 16 or older. As a result, youth will be assessed only one time, which

is the youth preference according to feedback from youth. DFPS will conduct an annual update of the independent living skills the youth learned the preceding year to ensure the youth is being prepared for successful transition to adulthood. The annual update will be conducted through the Child's Plan of Service in coordination with the youth, the caseworker, Preparation for Adult Living staff, and the caregiver. The annual update includes a review of the original assessment responses and documentation of the youth's progress and continued needs.

Transition planning sections within the Child's Plan of Service are used to determine needs and make informed choices regarding the provision of services. Preparation for Adult Living staff participate in Circles of Support meetings where transition planning is reviewed.

Starting at age 16, youth either attend at least 30 hours of life skills training classes or complete the *Independent Study Guide* (paper or web version). A curriculum outline is available for statewide use. During the fiscal year 2021-22 biennium, a pilot of an online life skills training service, Life Skills Reimagined, was available. Youth had the opportunity to provide feedback through an evaluation along with a knowledge assessment at the end of class sessions or completion of the *Independent Study Guide* as a measure of the life skills learned. Preparation for Adult Living contractors assist youth with services to develop skills in food preparation and in nutrition education that promotes healthy food choices in addition to providing financial literacy education.

### Fiscal Year 2022 Youth Training Outcomes

Training Type	Number of DFPS Youth Served
Life Skills Training Classes	1,151
Web-Based <i>Independent Study Guide</i>	82
Print Version <i>Independent Study Guide</i>	136
Life Skills Reimagined Pilot	23
School Training Documents in the Individual Education Plan	105

DFPS is in process of updating the *Independent Study Guide* to incorporate more interactive activities, as well as exploring more accessible media types to improve training comprehension and retention.

Efforts are underway to increase the life skills training completion rate for youth who are 18 years and older and leave substitute care. A logic model with five main objectives was created for this effort:

1. **Increase the life skills training completion rate.** Initial targets began with 85 percent or more statewide and for every region by the end of fiscal year 2018 with an outcome of 91.5 percent achieved. Targets subsequently were set at 92 percent in fiscal years 2019 and 2020 with a completion rate of 91.7 percent and 94 percent

achieved respectively. Fiscal years 2021 and 2022 target of 95 percent resulted in an achievement rate of 94.9 percent and 93.6 percent respectively.

2. **Improve communication and education to state office, regional staff, and kinship providers.** Monthly support calls are held with regional Preparation for Adult Living staff to discuss successes, needs, and status of completion. A memo was sent to kinship providers with information about life skills training and benefits to participation.
3. **Develop new training options for youth.** A paper version of the *Independent Study Guide* was created for use with youth who do not have computer access. During fiscal year 2021, the *Independent Study Guide* was refreshed and redesigned with input from youth with lived experience in foster care. The new online training was piloted in fiscal year 2022.
4. **Conduct youth surveys and gather information to improve training options for youth.** Youth surveyed about their preferred method of training showed a high number preference for classroom training over other methods due to peer interaction.
5. **Residential contract providers support and provide life skills training as outlined in contract requirements.** Regions are offering some classes at residential treatment facilities. CPS Preparation for Adult Living staff report youth non-attendance to the residential contract manager.

Youth aged 16 and older have the opportunity to participate in a state or regional event where they receive information and participate in experiential activities to enhance their knowledge of life skills. Youth aged 14 and 15 are invited when funding is available. The youth's experiential learning while in care and through Preparation for Adult Living Program activities complement one another and are addressed in each core life skill area in the youth's service and transition plan. Additional state funding was received to add an additional teen conference per region, increase the number of youth who participate in aging-out seminars, and add an additional statewide vocational/college conference with emphasis on youth who live in residential treatment centers. A career and technical college conference were held at Austin Community College in Austin July 14-15, 2022. DFPS is seeking a new partner in fiscal year 2023 for this conference going forward.

DFPS was legislatively required to collaborate with stakeholders to develop a plan to standardize the curriculum for the Preparation for Adult Living program that ensures youth 14 years or older (but younger than age 21) enrolled in the program receive relevant and age-appropriate information and training. Workgroup meetings were held to develop the plan which resulted in a report and recommendations submitted to the Texas Legislature. In fiscal year 2022, DFPS made the following progress on implementing these recommendations:

- Updated the current knowledge assessment to make needed revisions;
- Explored high school or college credit for the entire series of life skills training classes while being mindful youth must meet certain criteria to be eligible for the tuition fee waiver through a DFPS-led post-secondary workgroup with Texas Higher Education Coordinating Board staff and faculty from both rural and urban colleges and universities across the state which concluded that college credit could not be extended;

- Began reviewing other available life skills assessment tools and assess any costs associated with changing the tool;
- Began reviewing the aging-out seminar curriculum outline and materials for updates and the addition more experiential activities;
- Began discussions with the CPS case review team and DFPS monitoring staff ways to assess and report to DFPS if youth receive experiential and normalcy activities;
- Began determining the costs associated with hiring external curriculum development experts to make changes to the Preparation for Adult Living life skills training curriculum, as well as the costs associated with extending the number of classroom hours and adding specific training for 14 and 15-year-old youth.

### **Division X – Supporting Foster Youth and Families Through the Pandemic Act**

On December 27, 2020, the federal government enacted The Consolidated Appropriations Act, 2021, P.L. 116-260. Division X of P.L. 116-260, titled the “Supporting Foster Youth and Families Through the Pandemic Act” which included additional, supplemental, or enhanced funding. Taken with the ACYF-CB-PI-21-04 guidance received from the Administration for Children and Families (ACF) on March 9, 2021, Texas received additional Chafee funding with no need of matching state dollars. Texas received traditional Chafee grants of \$25,322,153, as well as grants for the Educational and Training Voucher Program in the amount of \$3,680,546.

During federal fiscal year 2021, the ACF and federal partners allowed for expansions to eligibility, including youth who experienced foster care after age 14 up to their 27th birthday. Although flexibilities for Preparation for Adult Living services expired September 30, 2021, the funds carried over until September 30, 2022. DFPS worked to obligate these funds to existing transitional living services and DFPS programs, identify existing external programs that could be supported with funds, and create new initiatives and programs to utilize the funding.

The major sources for expending these funds fell into three programs:

1. **Preparation for Adult Living staff** – Claims processing contracts utilized by Preparation for Adult Living staff to support the successful transition to adulthood of youth in DFPS custody were increased by the maximum amount allowable under Texas contracting law, obligating \$8,544,000 for staff usage in the fiscal year 2021-22 biennium. The primary group targeted for support were youth and young adults in care or in extended foster care age 14 to 20. During fiscal year 2021, this funding also provided emergency support for young adults who aged-out of care up to age 27 utilizing the increased eligibility provided by the federal authorities. Funding was applied to eligible housing costs (e.g., rent and utilities); transportation needs (e.g., car repairs and insurance), and other types of educational, vocational, and other auxiliary transitional living needs supports. During fiscal year 2021, funding allowed for a total of 3,111 offered individual supportive services.
2. **Transition Support and Aftercare Services** – DFPS increased existing transition support and aftercare contracts by the maximum amount allowable under Texas contracting law, obligating \$3,310,038.80 toward the support of young adults who

aged-out of care up to age 21 during the fiscal year 2021-22 biennium. These funds provided for an increase to aftercare room and board funds from the normal cap of \$3,000 up to \$4,000, as well as funding other educational, vocational, and auxiliary transitional needs to ensure the successful transition of the program clients.

3. **PanAid Program** – DFPS entered into open procurement, securing contracts with the Texas Alliance of Child and Family Services (TACFS) and Monarch Family Services. This program obligated \$11,250,000 to provide emergency pandemic assistance to young adults aged 18 until their 27th birthday in support of pandemic and other transitional needs which came in the form of both direct pandemic assistance payments, as well as targeted reimbursements of eligible expenses. The procurement process left a small window in which to expend the funds, and ultimately \$9,582,930.44 was expended, providing \$8,991,623.21 in support to 2,372 unique young adults.

Other projects initiated through this funding source included:

- \$171,113 to partner with Texas State University to provide employment readiness and mentorship programs for young adults with lived experience in foster care;
- \$257,710 to fund experiential and developmental camps to help prepare current foster youth for successful transitions to adulthood;
- \$98,088 for job coach and job training support to youth and young adults who experienced foster care;
- \$1 million allocated to provide supportive payments for young adults who exited foster care to support successful transitions; and
- \$100,000 in payments to support pregnant and parenting teens.

### **Youth Take Flight for Success Seminars**

At age 17, youth participate in a one-day regional aging-out seminar where they receive information about human trafficking, healthy relationships, financial literacy, nutrition, self-advocacy, and transitional living services resources and benefits. Based on participant feedback, the event was rebranded and now called Youth Take Flight for Success seminars. In addition, materials and tools were updated to include more experiential learning activities. In fiscal year 2022, 352 youth participated in Youth Take Flight for Success seminars.

Youth and young adults aged 16 to 21 may participate in contracted transition and financial support (TFS) services. In Region 6, these services are still referred to as aftercare case management. Through these services, the case manager works with the youth or young adult to update or develop their individual transition plan. Need-based aftercare room and board assistance is provided through case management to eligible young adults who are no longer in DFPS conservatorship or a DFPS extended foster care placement. In fiscal year 2022, 4,306 youth and young adults received TFS/ACCM services, and 893 young adults received aftercare room and board assistance. In fiscal year 2022, 1,585 young adults received a transitional living allowance to help with basic adult living start-up costs.

Services provided to youth and young adults are reviewed to determine what types of

services are provided and by what frequency. DFPS analyzes the data by region to identify patterns or trends in certain parts of the state and determine if services need to be strengthened. The National Youth in Transition Database data can be used to run additional reports tailored to the specific desired information. Currently data is pulled to determine what life skills training core elements were provided to youth prior to leaving care, help meet the statewide goal of a 95 percent completion rate for youth age 18 or older exiting substitute care in fiscal year 2022. Each region completes and submits an annual report that includes service data and a description of services provided. Data from these regional reports is disseminated and incorporated into the state plan.

National Youth in Transition Database outcomes have motivated regions to offer more services either through Preparation for Adult Living contract providers or community organizations around housing, employment, and education:

- **Region 01** -- St. Francis has secured MOUs with the Lubbock, South Plains, and Panhandle housing authorities.
- **Region 02** – Preparation for Adult Living youth are referred to the Texas Workforce Commission advocate through Baptist Child and Family Services Health and Human Services of San Antonio to provide training and employment assistance to youth. The Texas Workforce Commission creates partnerships with local businesses in efforts to provide youth entry level positions that allow for growing opportunities within the business.
- **Region 03** – The Preparation for Adult Living Program collaborates with seven separate area and county housing authorities across both the legacy and Single Source Continuum Contractor (SSCC) areas to secure housing vouchers to help youth with their successful transition to adult living. The SSCC Our Communities Our Kids has partnerships with the housing authorities of Mesquite, Fort Worth and Tarrant counties, as well as the TRAC center.
- **Region 04** – Working relationships with four separate local non-profit organizations are in place for outreach and to meet the needs of youth formerly in foster care experiencing homelessness. Additionally, a partnership with Baptist Child and Family Services Health and Human Services of San Antonio and the Texas Workforce Commission help find employment with youth.
- **Region 05** – Work with the Beaumont Housing Authority on the Family Unification Program continues. Preparation for Adult Living executed MOUs with Port Arthur Housing Authority and Deep East Texas Council of Governments to secure 25 housing vouchers for the Foster Youth to Independence Program. Preparation for Adult Living staff continues to work on establishing the Foster Youth to Independence Program with the Beaumont and Nacogdoches housing authorities.
- **Region 06** – The Houston Alumni and Youth Center continues to pair youth age 16 and older with transition coaches who serve as a friend and guide in their successful transition to adulthood.
- **Region 07** – Multiple housing voucher options are available to young adults/ A total of ten college and university tours were coordinated for youth to explore higher education options, as well as a financial management workshop with a local banking authority.
- **Region 08** – A Foster Youth to Independence Program with Bexar County Housing Authority for 25 vouchers launched to support young adults in applying for and utilizing housing vouchers. The partnership also works closely with local workforce staff to find

employment for youth. Region 8 continues to partner with Thrive Youth Center in providing supportive services for LGBTQ youth, as well as multi-agency workgroups, such as The Interagency Foster Care Collaboration and Bexar County Fostering Educational Success group.

- **Region 09** –Housing voucher agreements with the San Angelo, Odessa, and Midland County housing authorities were established.
- **Region 10** – Identified youth employment needs through data analysis and worked to incorporate Texas Workforce Borderplex to share employment information with youth during some of their events. The region also offers dedicated workforce staff at the local transition center to assist Preparation for Adult Living youth.
- **Region 11** – Partnered with Cameron Workforce to explore more workforce meetings and job trainings for regional youth. Eight young adults have found housing through the local housing authorities.

Service data is entered into IMPACT by Preparation for Adult Living staff and reported to the National Youth in Transition Database. Preparation for Adult Living staff receive regular training and reminders to ensure statewide consistency of service data entry. Preparation for Adult Living staff educate contract providers to clarify service definitions and other documentation needs. A report is available to determine how many youths received training prior to leaving care and is shared with each region monthly to look for any discrepancies and determine if improvements are needed on the provision of life skills trainings. Regional case reviews are conducted periodically on an informal basis and at the end of a reporting period to ensure statewide consistency of data entry and collection of high-quality data. The review consists of a cross check of DFPS system data entry as compared to contract provider service documentation. Feedback and technical assistance are provided to staff entering information depending on the results of the review. Regional Preparation for Adult Living Staff are provided with tools to help them understand data entry requirements, such as the National Youth in Transition Database Manual. Regular training, case reviews and reminders help achieve more accurate and consistent data statewide. A workgroup of Preparation for Adult Living staff participated in modernization efforts to improve the DFPS electronic reporting and case recording system (IMPACT). Improvements resulted in a more user-friendly system which includes additional details about services and training provided to youth and young adults. Roll out was in April 2019.

DFPS has provided information regarding the National Youth in Transition Database outcomes and service data results at a variety of venues and events, such as Preparation for Adult Living staff meetings, internal DFPS meetings, Youth Leadership Council meetings, Youth Take Flight for Success Seminars, and regional or statewide presentations to the community, including to CASA, Preparation for Adult Living contract providers, and child-placing agencies. DFPS continues to look at ways to branch out to other stakeholders to provide this information. The Youth Leadership Council made suggestions for updating the survey instrument to include Texas-specific information in the descriptions for youth to better understand the questions and more accurately provide a response. Updates to the descriptions will be added as part of the DFPS electronic reporting and case recording system (IMPACT) modernization efforts. One region

provides this information at youth service review hearings. DFPS continues to collect high quality data using existing staff positions, tools, and processes known to be effective for DFPS in the past. The state plan is posted on the public DFPS website, which includes National Youth in Transition Database data. DFPS continues to explore the best ways with youth and young adults to post data.

The data for fiscal year 2020 is posted on the DFPS website in the 2023-2027 DFPS Strategic Plan at: [https://www.dfps.state.tx.us/About\\_DFPS/Strategic\\_Plans/documents/2023-2027-DFPS\\_Strategic\\_Plan.pdf](https://www.dfps.state.tx.us/About_DFPS/Strategic_Plans/documents/2023-2027-DFPS_Strategic_Plan.pdf) .

Eligibility for both Chafee Foster Care Independence Program services and other transitional living services is outlined in the CPS policy handbook and *Transitional Living Services Resource Guide* and cites both federal and state eligibility criteria. This information is updated periodically based on new federal and state legislation. DFPS uses objective criteria for determining eligibility for services and the Health and Human Services Foster Care Ombudsman for youth under 18 and DFPS Office of Consumer Affairs is available to young adults over 18 to respond to complaints about unfair treatment and provide objective unbiased investigations on complaints filed. Both offices have conducted outreach efforts at regional and statewide Preparation for Adult Living events to inform youth and young adults about their services. Information about how to file a complaint is posted on the DFPS website in the *Texas Foster Care Handbook for Children, Youth, and Young Adults*. Contract language secures provider assurances to provide fair and equitable treatment that meets the individual needs of each youth or young adult.

Preparation for Adult Living staff monitor for quality and content of services provided by a contractor and contract managers monitor for contract compliance (programmatic and fiscal). Monitoring tools (forms) and a process guide are utilized.

### **Employment, Career Exploration, Vocational Training and Job Placement and Retention**

Preparation for Adult Living staff, contractors, and workforce partners in all regions and statewide continue to help youth gain job opportunities and work experiences while in care and upon exiting care. The most recent National Youth in Transition Database results available (federal fiscal year 2021) indicate that, of the random sample of 21-year-olds young adults who took the survey at age 17, a total of 28 percent were working full time and 17 percent were working part time.

DFPS hired a youth employment program specialist as part of the Transitional Living Services team. As of Summer 2022, the employment program specialist duties were combined into a Transitional Living Services Team Lead position to 1) expand and grow internships and apprenticeships; 2) increase youth and young adult job preparedness and readiness especially through hands on activities; and 3) strengthen and define DFPS relationship and roles with Texas Workforce Commission and local workforce advocates, boards and centers.

DFPS and the Texas Workforce Commission renewed a formal MOU for the term of September 1, 2021, to August 31, 2026. Some changes to the agreement included coordination of social media efforts and relevant trainings and assurance of the DFPS Transitional Living Services Team Lead collaboration with transition center and local office liaisons to address youth employment and training needs. The agreement ensures Preparation for Adult Living objectives are met and youth currently and formerly in care receive priority for workforce services through other formal agreements between regions and local workforce boards. DFPS and the Texas Workforce Commission continue to collaborate and partner statewide. With the involvement of the Texas Workforce Commission, Preparation for Adult Living staff are informed of workforce services, including summer youth employment opportunities offered through the local workforce centers, make referrals for workforce services, and determine how these services benefit and assist youth to become self-sufficient when transitioning from care. The Texas Workforce Commission hosted their 6th annual youth in foster care conference at the Embassy Suites in San Marcos April 6-7, 2023. Invitees were representatives of each transition center; regional CPS Preparation for Adult Living, education specialists, and State Office staff; local workforce boards and centers; the Texas Education Agency; post-secondary institutions of higher learning; two young adults formerly in foster care from each transition center; and community advocates, such as judges and the Children's Commission. DFPS presented in several workshops related to DFPS services, housing, and educational resources, as well as how to work effectively with youth and young adults currently or formerly in foster care.

Preparation for Adult living staff refer youth to AmeriCorps and Job Corps, as well as job skills trainings and enrollment in summer employment programs, job readiness and career exploration classes, vocational rehabilitation services and other services administered through the workforce development boards, Goodwill Industries, and the Salvation Army. Job Corps has resumed accepting new students on campus. Transition centers continue to offer career exploration, job readiness, and job search assistance in collaboration with the workforce advocates. CPS expects more out-of-school youth will receive services provided under the Workforce Innovation and Opportunity Act for work experiences, such as summer and year-round employment, pre-apprenticeship, on-the-job training or internships, and job shadowing. The Texas Workforce Commission has a variety of resources, posted on their website (<http://www.twc.state.tx.us/>) to include career and education tools, work preparation information, market data, educational requirements to obtain a high demand job in Texas, and vocational rehabilitation services. Additionally, the Texas Workforce Commission began providing statewide bi-annual employment skill demand data also broken down by the 11 DFPS regions. Youth and young adults are informed about workforce resources through their workforce advocate and various Preparation for Adult Living activities and events.

DFPS uses the calendar year reports provided by the Texas Workforce Commission to identify the number of youth or young adults receiving a workforce service. In calendar year 2022, a total of 394 out of 450 (88 percent) referred unduplicated youth and young adults received workforce services through either the workforce solutions offices or from the workforce advocates located at the transition centers. youth continue to be referred

for workforce services in fiscal year 2023. Workforce solutions offices help with some supportive resources to eliminate barriers to employment such as interview and work clothing, childcare, mileage reimbursement, and bus passes.

Chafee funds are used for youth to obtain clothing for employment or interviews and case management services to connect youth to community resources they need to obtain or maintain employment. In fiscal year 2022, 728 youth and young adults received educational or vocational Chafee services, including vocational assessments, vocational training, tutoring, graduation items (e.g., cap, gown), high school completion supports, and GED test fees.

Community resources provided are not reported to the National Youth in Transition Database as they are not provided or paid for by the state agency. However, both quarterly and annual data is exchanged between DFPS and the Texas Workforce Commission as part of an agreement to determine which youth are receiving workforce related services from the referrals provided.

### **Employment Services Youth and Young Adults with Special Needs**

DFPS developmental disability specialists coordinate with schools, the Texas Workforce Commission vocational rehabilitation services, and HHSC to obtain vocational training and employment services for youth and young adults with disabilities. The Texas Legislature created the Employment First Policy and Task Force related to promoting competitive employment opportunities that provide a living wage to people with disabilities. The task force is comprised of staff from DFPS, HHSC, the Texas Education Agency, and the Texas Workforce Commission. HHSC adopted the Employment First policy. Agencies involved in the task force have developed a work plan to incorporate this policy into their own policies and rules.

As a requirement of the interagency MOUs between DFPS and the Texas Workforce Commission and local DFPS offices, local workforce boards and transition centers worked together to address the challenges facing youth currently and formerly in care youth, the Texas Workforce Commission designated a point of contact at the local workforce boards for youth, Preparation for Adult Living staff, foster care providers and other DFPS staff to access assistance and services. The agreement also directs local workforce development boards to ensure workforce services are prioritized and targeted to meet the needs of eligible youth. DFPS ensures interested youth and young adults have access to workforce services available at the workforce solutions offices and transition centers.

Transition centers serve youth and young adults formerly in foster care up to age 25 using various funding sources. In addition to providing other supportive services, a designated workforce advocate funded by the Texas Workforce Commission is available at all transition centers to offer career exploration services, job readiness and job search programs, and job placement assistance.

### **Texas Workforce Commission and Transition Center Data**

Through an interagency agreement with DFPS state and regional offices and local workforce development boards, the Texas Workforce Commission matches DFPS data records for both quarterly and calendar year reports. These data reports include the number of youths referred for workforce services at local workforce solutions offices and those who received a workforce service. Annual data collected and reported by the Texas Workforce Commission includes the number of youths employed, the average wage earned each quarter, and the number of youth and young adults who received a service at one of the transition centers funded by the Texas Workforce Commission. As reported by the Texas Workforce Commission from January 2021 to December 2022, a total of 394 out of 450 (88 percent) unduplicated youth and young adults received workforce services through either the workforce solutions offices or from the workforce advocates located at the transition centers.

### **Help youth prepare for and enter postsecondary training and educational institutions.**

Chafee funding is used to provide educational and vocational services, such as vocational assessments, vocational training, tutoring, high school completion supports, and fees for GED tests. In fiscal year 2022, 728 youth and young adults received educational or vocational Chafee services.

Preparation for Adult Living staff collaborate with community organizations to provide graduation celebrations for high school and GED achievements. Graduates received certificates of recognition signed by the Governor in fiscal year 2022 and certificates will be requested again for fiscal year 2023. In fiscal year 2022, graduation celebrations occurred in all 11 regions. Regions are exploring creative ways to celebrate youth for their graduation. Many community organizations provide independent living supplies, such as cookware, sheets, towels, microwave ovens, and other household supplies or gift cards, as recognition of the youth or young adult's accomplishments. The State Office Transitional Living Services team has worked with Day 1 Bags, a 501(c)(3) non-profit, in providing backpacks, books, document folders, and gift certificates to all graduates Texas. Day 1 bags began working with other local charities to also provide hand-quilted blankets as well.

Regional and statewide tours to universities, community colleges, and vocational and technical schools are conducted annually. Preparation for Adult Living staff and contractors help youth complete forms needed for postsecondary training and education programs. DFPS partners with colleges and universities across the state to help students. Several universities including the University of Texas at Arlington, University of Texas at Pan-American, and Texas State University continue to provide residential housing scholarships for former foster care youth. Preparation for Adult Living college conferences are held at different colleges or universities annually. The Preparation for Adult Living Statewide College Conference began a partnership with the University of Houston in 2023. The event was held March 9-10, 2023. Austin Community College hosted the State Technical College Conference on July 14-15, 2022. The annual statewide Teen Conference is scheduled for July 12-14, 2023, at the University of Texas in Austin.

The most recent National Youth in Transition Database results available (federal fiscal year 2021) indicated 62 percent of a random sample of 21-year-old young adults who took the survey at age 17 completed high school or GED certification and 21 percent were enrolled in and attending high school, GED classes, post-high school vocational training, or college. DFPS staff reviewed comparisons of the data across the first cohort of youth from age 17 to 21 provided by ACF in a data snapshot and shared with staff and the community. National Youth in Transition Database Data is shared with state legislators when data is requested.

### **State Tuition and Fee Waiver**

College tuition and fees are waived for students in DFPS conservatorship:

- On the day preceding their 18th birthday;
- On or after the day of the student's 14th birthday, if the student was eligible for adoption on or after that day;
- On the day the student graduated from high school or received the equivalent of a high school diploma;
- On the day the student is adopted if that date is on or after September 1, 2009;
- On the day permanent managing conservatorship of the student was granted to a person other than the student's parent, if that date is on or after September 1, 2009;
- If a youth was returned to the legal responsibility of the parent on or after June 1, 2016;
- At age 14 and older and were in DFPS' permanent managing conservatorship;
- At age 16 and older and were in DFPS' temporary managing conservatorship; or
- On the day the student enrolls in a dual credit course or other course for which a high-school student may earn joint high school and college credit.

Students must enroll no later than their 25th birthday in an institution of higher education as an undergraduate student.

Tuition and fees are waived for youth enrolled in dual credit courses or other courses for which a high school student may earn joint high school and college credits, if the student is in DFPS conservatorship at the time of enrollment. Dual credit courses include both academic and technical courses covered by the tuition waiver. Additionally, students enrolled in dual college credit courses must be attending school full-time to be able apply for the Education and Training Voucher Program to cover certain college costs, such as tuition and fees not otherwise covered, transportation, and books.

### **Annual Higher Education Data Report-Foster Care Students**

DFPS has a collaborative partnership and an interagency agreement with the Texas Higher Education Coordinating Board to collect college data on current and former youth and young adults who attend Texas state-funded universities and colleges. Data also includes the number of youths who utilize the tuition and fee waiver.

The agreement outlines data elements exchanged to facilitate DFPS' evaluation of educational outcomes of students formerly in DFPS conservatorship. DFPS and the Texas Higher Educating Coordinating Board renewed this agreement in July 2022 to expire on

January 31, 2026. The agreement includes the following:

- The exchange of information will facilitate the evaluation of educational outcomes for former foster care students;
- CPS will provide annual demographic information to the Texas Higher Education Coordinating Board of former foster care students enrolled in state colleges and universities;
- The Texas Higher Education Coordinating Board will provide CPS aggregate data on the identified educational outcomes with demographic information received;
- CPS and the Texas Higher Education Coordinating Board will determine educational outcomes, including student academic achievement, graduation rates, attendance, and others to be identified and relevant to the purpose of the evaluation.
- CPS may authorize the Texas Higher Education Coordinating Board to provide education research centers with demographic information to perform additional analysis for educational outcomes only for youth in foster care.

The Texas Higher Education Coordinating Board submits an annual report to DFPS showing the number of adopted youth and foster youth who have utilized the tuition waiver each academic year by school. This report is used for the federal match requirement for the Education and Training Voucher Program. For the 2020-21 academic year, the Texas Higher Education Coordinating Board reported a total of 3,415 tuition exemptions granted to foster care students and 3,419 for adopted youth. DFPS consults regularly with the Texas Higher Education Coordinating Board on issues or questions about the tuition and fee waiver. The Texas Higher Education Coordinating Board posts a list of state colleges and universities required to appoint foster care student liaisons, on its Colleges for All Texans webpage.

The Children's Commission facilitates the Foster Care and Education Postsecondary Education workgroup. The members of the workgroup consist of youth, colleges and universities, technical school, Preparation for Adult Living staff and providers, CASA, the Texas Education Agency, the Texas Workforce Commission, transition center, the Texas Higher Education Coordinating Board, and legal advocates. The workgroup developed a comprehensive resource guide for college foster care student liaisons, high school counselors, caseworkers, caregivers, and students. It identifies a website or online tool that provides a one-stop resource of helpful links to CPS programs and other important information for former foster care students and identifies available data to track post-secondary outcomes of youth and young adults in foster care. The workgroup recently began a series of webinars geared toward foster care liaisons, school counselors, and other educational advocates. Webinars with targeted audiences of school counselors or college and university faculty, including financial aid and admissions staff and foster care liaisons, have continued since the initial webinar in 2021.

### **Education and Training Voucher Program**

Youth and young adults potentially eligible for the Education and Training Voucher Program must meet one of the following specific criteria:

- Youth least 16 years old and in DFPS conservatorship and young adults in DFPS extended foster care;

- Youth who have aged-out of DFPS foster care and are not yet age 23;
- Youth who have been adopted from DFPS foster care after turning age 16 and not yet age 23;
- Youth who have entered the Permanency Care Assistance program from DFPS foster care after age 16 and are not yet age 23;
- Youth placed in the custody of the Texas Juvenile Justice Department AND in a Title IV-E paid placement when turning age 18 and are not yet age 23;
- Tribal youth or young adults in tribal foster care who are not yet age 23; and
- Youth who have been legally emancipated while in DFPS conservatorship and are not yet age 23.

Additionally, students participating in the Education and Training Voucher Program can remain eligible up until the month they turn 23 years old as long as they remain in good standing with the school toward completing their degree. In no event can a student participate in the program for more than five years, whether those years are consecutive or not. Eligible youth enrolled in dual college credit course(s) where joint high school and college credits are earned can apply to the Education and Training Voucher Program for college-related expenses such as books, transportation, and tutoring services.

From May 2021 through September 30, 2021, the eligible age was increased to until their 27th birthday due to federal guidance for the pandemic. From the period October 1, 2021, through September 2022, until all pandemic funds for ETV are expended DFPS increased the age cap to the 25th birthday. While age 26 is the regular non-pandemic federal eligibility limit for ETV, DFPS decided to increase the age to 25 after September 2021 because it was not clear that with the increase of the ETV amount up to \$12,000 if there would be enough federal funds to cover all applicants that applied. Currently, the age cap has reverted back to the young adults 23<sup>rd</sup> birthday.

The Education and Training Voucher Program is a statewide program contracted to Baptist Child and Family Services Health and Human Services of San Antonio. The contractor has an Education and Training Voucher lead and four additional staff members to administer the program statewide. The current contract is in place through federal fiscal year 2023. The contractor's staff collect certain student demographic information (e.g., gender, age, and race), higher education institution enrolled, and student spending. The Education and Training Voucher Program will serve youth who age-out of from another state's foster care system and move to Texas to attend school, if federal funding is available. Students who move to Texas and were previously receiving funds from another state need to continue to receive funds from the original state. Out-of-state students are provided contact information for their former state's independent living coordinator if they were previously receiving funds in that state to inquire about continuing in the Education and Training Voucher Program in Texas.

When students live with a parent or guardian, Education and Training Voucher Program contractor will verify whether DFPS adoption or permanency care assistance payments are being paid to the parent or guardian. This is to ensure Education and Training Voucher funds are not being used for the same services currently funded by DFPS. Upon approval

for the Education and Training Voucher Program, these students are required to enter into a rental agreement with the parent or guardian that describes each party's financial obligations for living expenses (e.g., housing, room and board, and utilities). Once the agreement is signed, the youth or young adult is paid directly and is responsible for paying the parent or guardian as agreed to in the rental agreement. Parents or guardians are not directly being paid Education and Training Voucher funds which are meant for the youth, or young adult, and youth and young adults learn financial management and responsibility. The Preparation for Adult Living staff, regional youth specialist, and Education and Training Voucher Program contractor staff help youth and young adults applying for the Education and Training Voucher Program.

The Education and Training Voucher Program follows the federal fiscal year schedule to report data including the unduplicated number of Education and Training Vouchers awarded for academic years (Fall to Summer) since the vouchers are primarily used during this time period and for the school year (July 1 to June 30). DFPS reports Education and Training Voucher services provided to youth and young adults to the National Youth in Transition Database each reporting period. Service data is reviewed for continuous quality program improvement. For the 2021-22 academic year, 407 vouchers were awarded, and 123 recipients were new program participants.

In an effort to increase enrollment and improve services and outcomes for Education and Training Voucher participants, the contractor is required to increase awareness, promote opportunities, report retention, recruit participants, expedite processing, identify common trends regarding barriers, and perform other quality assurance activities.

### **DFPS Scholarships**

DFPS provides scholarship opportunities to college bound students to cover basic non-tuition related expenses for former youth. The C. Ed Davis Scholarship fund provides up to \$1,000 annually for basic non-tuition needs for youth formerly in care who are majoring in government, political science, history, or another pre-law field. The Freshman and Sophomore Success Scholarship (formerly the Freshman Success Fund for Youth) is for young adults formerly in DFPS foster care attending a Texas state-funded institution of higher education. This includes community colleges, colleges, universities, and Texas State Technical College. Only students awarded the scholarship both semesters as a freshman may apply for the scholarship as a sophomore or as a second-year student at a Texas state-funded institution of higher education. Scholarships are \$1,000 per semester or academic term or \$2,000 for two semesters or academic terms.

### **College Collaborations**

The DFPS partners with Texas colleges and universities and the Texas Education Agency to provide outreach and communications services that help eligible youth attend Texas state-funded universities and colleges. The 13th annual Education Reach for Texans conference was held April 3-4, 2023, at Texas State University in San Marcos. The conference featured training for foster care liaisons and other relevant staff and stakeholders.

## **2. Help Children who have experienced foster care at age 14 or older achieve meaningful, permanent connections with a caring adult.**

Connection to a caring adult is captured through outcome reporting data to the National Youth in Transition Database each reporting period. The most recent National Youth in Transition Database results available (federal fiscal year 2021) reported 87 percent of a random sample of 21-year-old young adults who took the survey at age 17 have a current positive connection to an adult.

Regions continue to explore potential mentor programs and collaborations for both formal and informal mentors for youth aged 14 or older. Region's report self-selected or group mentorships and mentoring programs that focus on an independent living topic such as financial management seem to work better for youth. Regions 03, 05, 06, 07, 08 and 10 had active, established mentoring relationships in their communities for youth during fiscal 2022. Overall, 590 youth received mentoring services.

In Region 03, Unfaulted is an organization that provides support, mentorship, and education for young ladies from age 14 to 26. In Region 05, Antioch Missionary Baptist Church and Orange Church of God provided mentoring to Preparation for Adult Living youth. Region 06 hosted a Male Mentorship Event focusing on confidence, employment, leadership, and hygiene.

Region 06 piloted a program with Youth Advocate Programs, Inc which provided mentorship and wrap-around services to transition-age youth facing challenges with placements and other complex problems. The program provided wraparound service planning, behavioral health services, coaching, modeling, and help identifying and working towards improved placement and transition plans.

Region 07 offered partnerships with two mentoring programs, the Bright Angel Scholar program, and Partnerships for Children. Region 07 has three MOUs with Up Mentoring in Bryan, Transforming Life Center in Killeen, and YES Mentoring in Travis County to provide mentoring to youth in care. In Region 07, 104 youth in care were matched with mentors during fiscal year 2022. Region 08 has a collaborative effort with Project Thru and mentored 292 youth during fiscal year 2022. Region 10 provided youth with a job coach to mentor them in finding employment.

DFPS is legislatively required, along with SSCCs in collaboration with local governmental entities and faith and community organizations, to examine the feasibility of designing a volunteer mentor program for children in congregate care settings. A report was submitted to the Texas Legislature December 31, 2022, reporting the findings and recommendations for establishing a mentoring program.

Preparation for Adult Living staff, contracted providers, and other community resources provide casemanagement services to youth before or as the youth is leaving care. Case management services may begin at age 16, but typically do not begin until just before a youth turns age 18. This service can continue for the youth up to age 21 to help identify individual support persons or supportive networks in adult living. During fiscal year 2022,

these services were redesigned with youth aged 17 qualifying for pre-transition support services, and young adults age 18 to 21 who have aged-out and left care qualifying for post-transition support services and case management. Region 06 continues to offer the traditional aftercare case management services. In fiscal year 2022, 4,306 youth and young adults received TFS/ACCM services statewide.

Circles of Support are youth-driven/focused meetings offered to youth beginning at age 16. They enable youth to develop plans for a successful transition to adulthood and connect with supportive and caring adults who can help the youth after the youth leaves care. Circles of Support operate in all regions and are facilitated meetings with participants youth identify as “caring adults” and make up their support system. Circles of Support participants can be the youth’s birth family members, substitute care providers, teachers, relatives, church members, mentors, and others.

Special consideration is given when a youth wants to reconnect in a healthy way with the youth’s biological family, including after parental rights have been terminated. In these situations, significant preparation with the youth and conference participants takes place to ensure all participants understand the youth's desire to reconnect with their biological family and the conference process can be achieved in a safe and supportive manner.

The Texas chapter of the national Foster Care Alumni Association provides alumni contacts who serve as mentors to youth in care in several regions. The Preparation for Adult Living Program continues to link with the DFPS Texas Youth Helpline (1-800-989-6884) to provide support and outreach to youth living independently after foster care. Youth Helpline volunteers are trained on the needs of youth, such as emergency housing and legal assistance, and sometimes are the only “caring adult” a youth has as a point of contact. Youth who exit care continue to be provided with the toll-free number to call for counseling and locate services available in their communities. Youth or young adults can call, text, or chat online 24 hours a day.

DFPS staff continues to partner with Texas Rio Grande Legal Aid which works with young adults on various legal issues such as Medicaid, Tuition and Fee waivers, and accessing other transitional living services benefits.

### **3. Help children who have experienced foster care at age 14 or older engage in age or developmentally appropriate activities, positive youth development and experiential learning that reflects what their peers in intact family’s experience.**

#### **Positive Youth Development**

DFPS engages youth and young adults from all DFPS regions as partners and advisors in many DFPS efforts. They attend leadership trainings with CPS managers, serve on advisory committees, participate in surveys and interviews about program services, and conduct presentations with CPS staff. Youth and alumni meet approximately three times a year to address issues and make recommendations for improving services to children and youth in care and preparing to age-out of care. DFPS continually requests input from a youth and young adult perspective for policy and practice development, as well as on a

particular subject, activity, or service that impacts their time in care or transition to adulthood.

Regional youth specialists support youth and young adults while educating the community, stakeholders, and DFPS on issues facing youth as they transition out of care. They more formally infuse the voice of foster care youth in actual practice, as youth specialists are former youth. Regional youth specialists play a key role in the development and support of Youth Leadership Councils. DFPS employs two youth specialist program specialists who support the Statewide Youth Leadership Council and provide additional support to the Transitional Living Services team. They are both DFPS foster care alumni.

Each DFPS region is expected to employ a full-time youth specialist to support the ongoing development of local Youth Leadership Councils and act as a DFPS consultant across a continuum of youth services. As of April 16, 2023, one regional youth specialist position is currently filled in Region 06. While positions are vacant, the Preparation for Adult Living staff ensure Youth Leadership Council meetings and events occur regularly. Options for part-time positions were created to help recruit eligible youth specialist candidates who are engaged in post-secondary education opportunities. The youth specialist positions were upgraded to the Program Specialist I level in fiscal year 2020.

Youth specialists help to ensure youth are aware of available benefits, services, and resources and understand how to access them prior to and after leaving care. In addition, youth specialists help inform and educate youth about the Foster Care Bill of Rights.

### **Youth Leadership Councils**

The Statewide Youth Leadership Council includes two elected or appointed youth or young adults (ages 16 to 21 years) from each region's Youth Leadership Council. Councils identify issues and make recommendations for improving services to children and youth in care, review policies and program initiatives, and give feedback to DFPS which is reviewed and may be incorporated into program policies, best practices, or other program initiatives. DFPS also utilizes the Youth Leadership Council to obtain input on the changes to policy to ensure input is received from youth in care and accurately meet the needs of this population.

Statewide changes in protocol and requirements for all advisory councils changed the Youth Leadership Council structure, scope, and deliverables. Committee changes are intended to ensure vital constituencies are represented to effectively address the scope of the committee's work. Rules were developed and posted for public comment. Although neither the Youth Leadership Council membership nor purpose changed, the council must compile and submit an annual report of activities and events to the CPS Associate Commissioner. Texas Administrative Code Title 40, Section 702.515 formally established the Youth Leadership Council and includes its purpose, tasks, reporting requirements, membership, meeting schedule, decision-making process, and date of abolishment. This rule also exempts the Youth Leadership Council's from the Texas Open Meetings Act and requirements to submit names of council members for privacy reasons. Council by-laws, created and approved by a majority of the members guide the Statewide Youth

Leadership Council.

Statewide in-person meetings were held October 22, 2022, March 5-6, 2023, and an upcoming meeting planned in conjunction with the Texas Network of Youth Services Annual Conference for June 13-16, 2023. In these meetings, normalcy discussions and activities were included. In addition, youth were able to discuss concerns and give input on what works well and what can be improved in foster care. Some of the topics discussed were National Youth in Transition Database data, driver education, strategic sharing, the legislative process, and human trafficking. Laws recently passed by the 88th Texas Legislature will be discussed at the June meeting.

An in-person Texas Teen Conference is scheduled for July 2023 with the University of Texas at Austin and will include a fishbowl activity in which attendees (foster youth) are able to discuss normalcy and give input on improvements to foster care directly to DFPS leadership. The 2023 Texas Teen Conference will include in-depth presentations on Preparation for Adult Living benefits and breakout sessions on human trafficking, personal relationships, financial aid for college, and other topics of interest.

### **Activities for Fiscal Year 2023**

Various meetings were held across the state, giving youth the opportunity to discuss available benefits, services, and resources to increase awareness of where they can receive support while in foster care and when they age-out.

The Youth Leadership Council Meeting was held October 22, 2022, in Dallas trained the council on the legislative process, including how a bill becomes law and how bills impact youth and young adults currently or formerly in foster care. Other components included a strategic sharing activity, preparation for Youth in Action Day at the capital in Austin Texas, @Youthtakeflight Instagram, and review of the National Youth in Transition Database data.

A second Youth Leadership Council Meeting was held March 5-6, 2023, in Austin at a hotel, church, and the state capital in conjunction with Youth in Action Day. During this two-day meeting, the council met with the CPS Associate Commissioner to provide input on different topics related to services and their experiences in foster care. Participants worked in groups to prepare presentations to their legislative representatives, practiced presenting to the council for feedback, and attended Youth in Action Day at the capital sponsored by the Texas Network of Youth Services and met with their local law makers. This meeting also included a normalcy activity at Dave & Buster's where council members played games and had a buffet style dinner.

The next In-Person Statewide Youth Leadership Council meeting will be held in Houston June 13-16, 2023, in conjunction with the Texas Network of Youth Services conference. Topics for discussion will include human trafficking, legislative updates, health care benefits, CPS Rights of Children and Youth in Foster Care, and other important topics to the council. A normalcy activity will be included.

The Texas Legislature appropriated state funds for fiscal year 2023 to support regional and state youth leadership councils and youth specialist activities. The primary purpose of this funding is to:

- Assist regional youth specialists to coordinate and facilitate youth leadership activities and councils;
- Assist DFPS with the development of services, policies, and procedures for youth;
- Create and coordinate leadership opportunities for youth;
- Assist youth in understanding CPS Rights of Children and Youth in Foster Care; and
- Train state and regional youth specialists.

Funds have allowed staff to seek creative, youth-oriented meeting venues and activities to generate interest and encourage youth participation. Activities and events happen at bowling alleys, restaurants for holiday gatherings, cinemas for movie nights with snacks, and multipurpose entertainment and restaurant establishments. This allows for youth and young adults to experience normalcy opportunities. Staff reached out to young adults who recently left foster care and offered them paid opportunities to discuss the transition process from foster care into independence and provide advice on how to become more successful as they transition into adulthood. In addition, the funds have improved participation at the Statewide Youth Leadership Council by allowing for overnight meetings which reduce travel stress and fatigue, allowing for a longer and more robust meeting time and promoting bonding between members who otherwise would not have much time to build rapport with each other. If additional funds are needed to supplement state funds to support the Youth Leadership Council meetings, staff seek out community resources such as through CASA, child welfare boards, transition centers, post-secondary institutions of higher learning, and faith-based community and other local stakeholders.

### **Opportunities to Practice Daily Living Skills through experiential learning**

Foster parents and other providers are required to include training in daily living skills through practical activities such as meal preparation, nutrition education and cooking, use of public transportation when appropriate, financial literacy training (e.g., money management, credit history, and banking), and performing basic household tasks for youth aged 14 and older. If the youth have a source of income, the provider must assist the youth in establishing a savings account. Foster parents and caregivers must connect youth and young adults to community resources such as post-secondary education; employment opportunities; and vocational/technical school opportunities. The youth's opportunities to practice daily living skills through experiential learning while in foster care and the receipt of Preparation for Adult Living services should complement one another and are addressed in each core life skill area within the Child's Plan of Service. Foster parents receive training on normalcy from their child-placing agency to understand their role in allowing youth to participate in normalcy activities, such as going on outings with friends, going on dates, taking a driver's education course, participating in extracurricular activities, etc. The *24-hour Residential Requirements Guide* includes a link to the DFPS website of updated resources to aid foster care providers with access to web-based information about life skills and normalcy activities.

**4. Provide financial, housing, counseling, employment, education and other appropriate support and services to former foster care recipients between 18 and 21 years of age to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for preparing for and then making the transition from adolescence to adulthood.**

DFPS continues to contract and collaborate at the state and regional levels providing services and supports to youth aging out of DFPS conservatorship. Approaches include case management to access housing, health care, job training, and financial support. Agreements between DFPS regions and local workforce boards include strategies for engaging community interest in developing short term housing referrals for youth in transition in all regions, in addition to streamlined referrals, case management, improved employment readiness, job training, and placement opportunities.

To assist youth under 18 years of age in becoming financially independent, the Preparation for Adult Living staff have researched banks and credit unions in each region to find youth-friendly financial institutions that allow a minor to open a bank account without an adult co-signor. This is helpful as CPS caseworkers cannot co-sign for a bank account, and while providers can volunteer to co-sign, few of them offer. Youth are encouraged by CPS staff and providers to enter into employment when appropriate and as schedules permit and begin saving to become more financially independent when they age-out of care.

**Financial Assistance in coordination with Case Management for Young Adults Ages 18-21.**

Youth 18 to 21 years of age who have aged-out of DFPS conservatorship or leave the DFPS Extended Foster Care Program are eligible for up to \$3,000 (with a limitation of no more than \$500 per month) in Chafee aftercare room and board assistance if there is a need or emergency. From May 2021 to September 30, 2022, this number was increased to \$4,000 due to the HR133 pandemic funding received, and increased needs of young adults during this period. In fiscal year 2022, 893 young adults received aftercare room and board assistance which includes rent, rent deposit, utilities, utility deposit, host home, and food.

In a host home, a young adult rents a room in a family or single adult's home and agrees to basic rules while being largely responsible for meeting their own needs. Aftercare room and board assistance is coordinated with other services and benefits available to this population, such as Temporary Assistance to Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Medicaid, subsidized housing, and social support. Aftercare room and board services are offered through regional case management and aftercare services contracts. Through these contracts, services are available to youth both in and out of care from age 16 to 21. A case manager works with the youth on their budget and individual needs prior to providing financial assistance. Aftercare room and board payments are allowed for young adults living with their parent with the following assurances in place:

- A determination by Preparation for Adult Living staff that the parent (if a designated perpetrator) not be a threat to the health and safety of the youth;

- Preparation for Adult Living staff provide contractors with the names of the parents on the service authorization;
- A rental agreement is in place between the youth and parent; and
- Payment is made to the youth who is then responsible for paying their parent if there is a not a third party to make payment to.

A transitional living allowance of up to \$1,000 for initial adult living start-up costs is distributed in increments of up to \$500 per month for young adults up to age 21 who meet the DFPS criteria, including participating in life skills training and living in a DFPS- or Medicaid-paid placement within the 24 months before the allowance is initiated. This criterion can be waived by the Preparation for Adult Living Supervisor. Beginning May 2021 through September 30, 2022, these funds were increased to \$2,000 caps due to increased needs during the pandemic, and the availability of the HR133 pandemic funds provided by the federal government. In fiscal year 2021, a total of 1,595 young adults received transitional living allowances to help with basic start-up costs in adult living. During fiscal years 2021 and 2022, DFPS also entered into a procurement and executed the PanAid Program which provided pandemic assistance to young adults aged 18 and older until their 27th birthday to support continued successful transitions to independence. Through this program, funds had to be obligated to young adults by September 30, 2021, due to federal guidelines on the use of the funds for young adults aged 21 to 26 years old and liquidated by December 20, 2021. This program provided support to 2,372 unique young adults and disbursed \$5,083,010 in living expenses (i.e., reimbursements for eligible rent and utilities payments to help young adults maintain housing), \$1,244,143 in eligible transportation expenses, and \$2,663,469 in direct pandemic assistance payments to assist young adults in maintaining their independence.

## **Housing**

Preparation for Adult Living staff refer young adults aged 18 to 21 years old to the Texas Runaway and Homeless Youth grantees of the Family and Youth Services Bureau for transitional housing, as appropriate.

DFPS established a housing program created by the CPS housing specialist which focuses on monitoring the young adult targeted rental assistance programs, including the Foster Youth to Independence, the Family Unification Program, and the Section 811 Rental Assistance project. The DFPS housing program goals include assisting in locating housing for as many youths as possible and ending homelessness for those transitioning from foster care to a successful adulthood.

The strategies to achieve these goals include:

- Providing information and training about youth targeted rental assistance programs and voucher options throughout Texas;
- Creating materials and a dedicated webpage to share related information;
- Conducting outreach to public housing authorities and increasing partnerships;
- Increasing referrals to these rental assistance programs, and
- Supporting additional housing options such as the supervised independent living, transitional center housing, transitional independent living, and traditional housing

choice voucher programs.

Each region now has a DFPS staff person who is the designated housing liaison and serves as the point of contact at the local level. The housing liaisons work with the housing specialist, transition centers, and local housing authorities on behalf of youth aging-out of care. Since the Foster Youth to Independence rental assistance program requires an agreement between DFPS and local housing authorities, the housing specialist and the regional housing liaisons actively pursue partnerships to expand the Foster Youth to Independence programs statewide. The Family Unification Programs are implemented by local housing authorities through an agreement with DFPS to refer young adults to these programs. Through another agreement with the Section 811 Project Rental Assistance program, DFPS refers youths to this program. This program also requires trained referral agents who can apply directly to the program on behalf of young adults. DFPS staff can apply directly to local housing authorities for the Foster Youth to Independence and Family Unification Programs.

### **Foster Youth to Independence Summary**

This program serves young adults 18 to 24 years old and requires a partnership between DFPS and local housing authorities. DFPS verifies foster care involvement and refers young adults to the local housing authorities who administer the voucher program. There has been progress securing partnerships with local housing authorities across the state.

- **Region 01** – The SSCC has a new housing liaison. This region has three Foster Youth to Independence agreements with the Panhandle, Lubbock, and South Plains PHAs. The Panhandle Public Housing Authority is the only active Foster Youth to Independence Program in the region and is responsible for all activity in this region. The Lubbock Public Housing Authority has no Foster Youth to Independence activity because it must first increase utilization of the Family Unification Program. Region 01 is currently only making Family Unification Program referrals. The South Plains Public Housing Authority covers a rural area, and there has been no demand for Foster Youth to Independence to date.
- **Region 02** – The SSCC has a new Foster Youth to Independence agreement with Abilene Public Housing Authority and is now starting to make referrals.
- **Region 03** – DFPS and the SSCC currently share coverage in this region. DFPS has three Foster Youth to Independence agreements with Texoma, Denton, and Mesquite PHAs. The SSCC has one Foster Youth to Independence agreement with Tarrant Public Housing Authority. The Mesquite Public Housing Authority has been the most active Foster Youth to Independence program. There are a number of Foster Youth to Independence agreements in the process of being updated.
- **Region 04** – DFPS covers this region which has two Foster Youth to Independence agreements with Longview and Paris PHAs. This region is primarily working with Longview Public Housing Authority. The region has a lease for their first young adult with Longview Public Housing Authority. However, utilization of Foster Youth to Independence in Longview is challenging due to limited affordable housing units and engagement of young adults. This region is working with Longview Public Housing Authority and community partners to address issues and concerns.
- **Region 05** – DFPS covers this region which has two Foster Youth to Independence

agreements with Deep East Texas and Port Arthur PHAs.

- **Region 06** – DFPS covers this region which has four Foster Youth to Independence agreements with Houston, Harris County, Rosenberg, and Galveston County PHAs.
- **Region 07** – DFPS covers this region which has four Foster Youth to Independence I agreements with Austin, Waco, Round Rock, and San Marcos PHAs. The San Marcos partnership is no longer active. The Austin Public Housing Authority is the most active PHA across the state.
- **Region 08** – DFPS and the SSCC both cover this region. The SSCC is exploring opportunities to create partnerships. DFPS has one Foster Youth to Independence agreement with Bexar County Public Housing Authority. This has been a very active program, and they have maxed out their initial 25 vouchers. DFPS is in the process of finalizing an agreement with San Antonio Public Housing Authority due to demand in this area.
- **Region 09** – DFPS covers this region which has three Foster Youth to Independence agreements with San Angelo, Odessa, and Midland PHAs.
- **Region 10** – DFPS covers this region which has two Foster Youth to Independence agreements with El Paso City and El Paso PHAs. The El Paso City partnership has been very active.
- **Region 11** – DFPS covers this region which has secured nine agreements overall including Brownsville, Corpus Christi, Harlingen, Kenedy, Laredo, Pharr, Port Isabel, Robstown, and San Benito PHAs.

Over the past year, DFPS has completed a project to verify all Foster Youth to Independence agreements, updating them when necessary and obtaining copies of agreements for the State Office records. There are a couple of regions still in the process of finalizing some updated agreements. DFPS also asked the regions to verify data with the PHAs. The fiscal year 2022 verified data indicates at least one Foster Youth to Independence agreement in every region. To date, DFPS has secured 35 Foster Youth to Independence agreements and leased up 205 young adults using this Foster Youth to Independence Program. A recent announcement indicates HUD will begin monitoring utilization of the Foster Youth to Independence programs moving forward. DFPS and SSCC partners are committed to training staff and increasing awareness of this program across the state, referring qualified applicants, and providing increased support and guidance to young adults throughout the Foster Youth to Independence application process. To maintain utilization rates and program success, it is important to monitor progress to quickly identify and fill available vouchers with new applicants when vacancies occur.

### **Family Unification Program Summary**

This program is administered by local housing authorities and requires a partnership with DFPS. Unlike the Foster Youth to Independence Program where DFPS has direct responsibilities for securing agreements with PHAs, the PHAs and HUD are responsible for implementing the Family Unification Programs and partnering with DFPS which then allows DFPS to make referrals to these programs across the state and monitor utilization. There were 26 partnerships across the state. However, this fiscal year HUD reduced the number of Family Unification programs to 16. The Family Unification Program is divided

into two categories: Family Unification Program families and young adults. Foster care involvement is not verified. However, the majority of those using the Family Unification Program are families at risk of losing a child to foster care due to homelessness, so services are a preventative measure. The remaining recipients are Family Unification Program young adults, and some housing authorities verify foster care involvement. As of November 2022, HUD reported 645 Family Unification Program families and young adults were currently using this program.

### **Section 811 Project Rental Assistance Summary**

This is a rental assistance program that targets young adults with disabilities leaving foster care age 18 to 62 years old. and the Texas Department of Housing and Community Affairs partner to refer applicants and administer the program, respectively. Several statewide referral agent trainings opportunities have occurred over the past couple of years, and trainings will be offered at least twice a year moving forward. There was one in March 2023 and the next one will be in the Fall 2023. These have allowed DFPS to increase the number of local referral agents from one to approximately 150 across the state. Section 811 requires training as a referral agent to be able to apply directly to the program. There is not as much availability in this program, and it is restricted geographically, but for those who obtain this voucher it can be a permanent housing solution. DFPS and the Texas Department of Housing and Community Affairs have worked closely to remove barriers and increase utilization of the program by young adults. Waiting list openings were announced in March 2023 and policies changes now to give preferences to young adults leaving foster care. The program is also trying to move from waitlists to real-time availability selection process. This means when there is an opening the program will reach out to DFPS approve and place a young adult immediately. To date, DFPS has made 53 applications to this program, housed 14 young adults overall, and currently houses five young adults. There are 20 young adults on the waitlist. DFPS and the Texas Department of Housing and Community Affairs will continue working closely to eliminate barriers to the program, develop preferential waitlists for young adults, open up waitlists, and increase the number of young adults in this program overall.

These are the three youth-targeted rental assistance programs being offered as part of the DFPS housing program. The housing specialist will continue to work with stakeholders such as HHSC and local mental health providers to build relationships that offer additional support for young adults with mental health and behavioral needs as part of the housing process. The housing specialists will identify additional referrals sources such as schools, universities, nonprofits, coordinated entry system, and continuum of care systems as potential partners to increase referrals. The housing specialist will monitor changes to these programs and provide information and guidance to the regions, so participation is maximized and homelessness for young adults with foster care involvement is avoided. The Housing Specialist will update information and training materials to increase awareness and understanding about the DFPS housing program and deliver training and presentations, as needed or requested. The housing specialist is always available to provide support and guidance on all matters related to housing and rental assistance programs.

Texas institutions of higher education are required to assist full-time students formerly in DFPS conservatorship or who have legally emancipated in locating temporary housing between academic terms (i.e., Christmas and summer holiday breaks). On campus housing is dependent upon availability and offerings at each individual institution. Students must request the housing assistance and are encouraged to inquire at financial aid offices, student affairs offices, admissions offices, or housing/residence life/residential living offices. Preparation for Adult Living staff provide this information to youth aging-out of DFPS foster care. Housing opportunities do not always meet the housing needs of young adults who attend during regular semesters. Additionally, the cost of student housing has risen and is not keeping pace with the college funds currently available to former foster care students. College is becoming increasingly more expensive which affects the ability of the student to complete their academic program and goals if there is no stable housing available. The Education and Training Voucher funds housing and room and board, but these funds are usually not adequate for sufficient housing. The housing specialist is working on building relationships and potential collaborations for housing as many young adults with foster care involvement as possible.

Young adults are offered the opportunity to stay in foster care after age 18 in the Extended Foster Care Program, and DFPS provides additional housing options for this through the Supervised Independent Living program. Currently, there are 37 contracted Supervised Independent Living providers offering placements in 10 regions in the state.

An increase in transitional living opportunities, particularly in rural communities, is needed to help meet growing needs for safe and affordable housing and provide stability for youth aging out of care.

According to the most recent National Youth in Transition Database data available (federal fiscal year 2021), 31 percent from a random sample of 21-year-old-respondents who took the survey at 17 reported having been homeless in the last two years. Preparation for Adult Living staff reviewed the comparison of the National Youth in Transition Data full cohort of surveys 17-21 provided by the ACF and shared with staff and community.

Preparation for Adult Living staff and contractors' partner and coordinate with several Runaway and Homeless Youth Act grantees on the prevention of homelessness through the provision of aftercare case management services. Some of these TRANSITIONAL LIVING programs include Lifeworks/Youth and Family Alliance in Austin, Central Texas Youth Services Bureaus in Belton, and Roy Maas Youth Alternatives in San Antonio.

### **Extended Foster Care Program**

Under the current Extended Foster Care Program policy, a young adult who ages out of conservatorship at age 18 can stay in extended foster care provided the young adult signs a voluntary extended foster care agreement and the following meets of the eligibility requirements. The young adult can stay up to the end of the month of their:

- 22nd birthday if regularly attending high school or enrolled in a program leading toward a high school diploma or GED; or
- 21st birthday if:

- ▶ Regularly attending an institution of higher education or a post-secondary vocational or technical program (minimum six hours per semester);
- ▶ Actively participating in a program or activity that promotes or removes barriers to employment;
- ▶ Employed for at least 80 hours per month; or
- ▶ Is incapable of doing any of the above due to a documented medical condition.

Services for young adults participating in the Extended Foster Care program include placement, monthly casework, continued work on transition plan goals, Circles of Support, access to the college tuition and fee waiver, use of the Education and Training Voucher funds to assist with educational expenses not related to housing (e.g., books, supplies, and transportation), and access to Preparation for Adult Living classes and staff for assistance with transitional living services. With the exception of aftercare room and board financial assistance, young adults continue to receive other Chafee Foster Care Independence Program services as noted. Implementation of the Extended Foster Care program optimized the ways that Chafee Foster Care Independence Program services are utilized. Caseworkers and providers ensure young adults are aware of and have access to all services and benefits needed to transition to self-sufficiency.

While in Extended Foster Care, the court continues jurisdiction; however, DFPS does not maintain legal custody (managing conservatorship in Texas). This allows the court to continue permanency hearings every six months to review progress on transition plan goals and services.

In state fiscal year 2022, a total of 1,422 young adults participated in the Extended Foster Care program. The average stay in Extended Foster care was 19 months.

Data collected assists in continuous quality improvement for delivery of Chafee Foster Care Independence Program services, particularly in relationship to the growth of the Supervised Independent Living program.

The foster care reimbursement rates are determined by a HHSC rate setting committee and approved by the Texas Legislature. Texas continues to pay a foster care reimbursement rate to a contracted provider rather than paying an amount directly to the young adult in the approved placement.

Regular providers serve all ages of youth and young adults in their programs and are required to be licensed by HHSC. Young adults have expressed dislike of the continued use of the term foster care for their situation, continued levels of supervision and restrictions on their activities, and limitations due to licensing restrictions. As a result, DFPS has changed the terminology in policy to reflect that these are young adults, not children or youth. A provider guide was developed by CPS program and contract staff and HHSC licensing staff to encourage age-appropriate activities and delineate the options currently allowed. DFPS developed a Supervised Independent Living program to allow a young adult more independence while still in extended foster care.

Many young adults leave or never enter Extended Foster Care because they want to begin making their own decisions free of governmental oversight or do not agree with the provider restrictions. Young adults who leave prematurely tend to have poor outcomes. When Extended Foster Care placements break down, it is difficult to find another provider willing to accept the person for placement, especially when they have other children and youth in their placement setting.

Unfortunately, some young adults stop meeting the eligibility requirements related to education or work. Since Extended Foster Care is voluntary and conditioned upon eligibility requirements, DFPS does not continue the foster care placement unless the young adult meets eligibility requirements.

Information about Extended Foster Care is updated regularly and posted on the DFPS public website. DFPS regularly monitors an Extended Foster Care e-mail account for young adults and others interested in knowing more. CPS staff continuously encourage youth and young adults to consider staying in Extended Foster Care to complete their education and employment goals.

### **Supervised Independent Living Placement Program**

Texas developed a Supervised Independent Living program that utilizes providers obtained through the state's procurement process. Young adults are able to live in age appropriate, non-traditional foster care settings regulated by contract. These settings may include apartments, shared housing, college and non-college dorms, as well as host homes. DFPS has 37 contracted providers (including eight universities through inter-agency contracts) in 11 regions. In March 2023, a total of 201 young adults were in Supervised Independent Living placements. Information about the Supervised Independent Living program is posted on the DFPS website. DFPS continues procurements to increase the number of providers and placements and hosts quarterly conference calls with current providers to discuss best practices and issues and barriers encountered by young adults enrolled in their programs.

The Supervised Independent Living program foster care reimbursement rates are determined by the HHSC rate setting committee and approved by the Texas Legislature. Texas continues to pay a foster care reimbursement rate to a contracted Supervised Independent Living program providers rather than paying an amount directly to the young adult so they can gain experience managing finances to address basic needs (e.g., purchasing food, etc.).

### **Trial Independence Period**

After federal law authorized young adults to have a trial independence period after leaving care that would allow them to return for Extended Foster Care if needed and resume their foster care eligibility, the Texas Legislature amended the statutes on extended court jurisdiction. Under current Texas law, young adults turning 18 years in DFPS conservatorship may have a six-month trial independence period extended to a 12-month trial independence period, if court ordered. During this period, the young adult can still contact their former caseworker for limited assistance, if needed. They can also contact

their Preparation for Adult Living staff for other transitional living services. In Texas, the court jurisdiction continues during the six- or twelve-month trial independence period and issues can be presented to the court, as needed.

### **Education**

The most recent National Youth in Transition Database data available (federal fiscal year 2021) indicated 62% of surveyed a random sample of 21-year-old young adults who took the survey at age 17 finished high school, or a GED certification and 21 percent were attending school currently (e.g., high school, GED classes, post-high school vocational training, or college). DFPS staff will also analyze data such as patterns across the full cohort of youth from ages 17 to 21 snapshot provided by ACF to find other opportunities to improve.

Preparations for Adult Living and other DFPS staff ensure young adults are aware of available post-secondary education programs and resources for those wanting to pursue higher education goals, including the Education and Training Voucher program, Texas college tuition and fee waiver, and two DFPS scholarships. DFPS staff and providers encourage youth and young adults to explore opportunities available through vocational and technical classes and career schools where the young adult can learn a skill and receive a certification in a shorter period than it would take to receive a two- or four-year degree and would fit with the goals of the young adult.

### **Employment and Other Services to Youth with Disabilities**

Services to youth and young adults with disabilities and special health care needs are provided through the team effort of specialized CPS staff in coordination with the child's primary caseworker. CPS employs developmental disability specialists across the state to improve well-being outcomes for children in DFPS conservatorship. These developmental disability specialists coordinate with the Texas Workforce Commission and HHSC to obtain vocational training and employment services for youth and young adults with disabilities. Texas offers supported employment services through programs such as the Medicaid waiver programs and Texas Workforce Commission vocational and rehabilitation services for youth with disabilities. Additionally, DFPS is a member of the Employment First Task Force focused on creating statewide opportunities and policies for people with disabilities of working age to obtain and maintain competitive employment and earn a living wage.

DFPS developmental disability specialists work with the local intellectual and developmental disability authorities to identify and obtain long term services and supports for transitioning youth and young adults with disabilities. DFPS is also represented on Community Resource Coordination Groups, along with the Texas Workforce Commission, the Texas Education Agency, and local community leaders. Community Resource Coordination Groups ensure every youth transitioning from care, including those with intellectual and developmental disabilities, have an opportunity to prepare and be equipped for a job or become more independent. The intent of the Community Resource Coordination Groups is to promote cross-agency partnering and resource sharing in support of youth transitioning from foster care and school. The DFPS goal,

through coordination of efforts by various specialized staff, is to ensure the individual needs of youth and young adults with disabilities and special health care needs are met.

DFPS development disability specialists assist youth and young adults with intellectual and developmental disabilities to access long-term services and supports such as obtaining a determination of disability eligibility; accessing local employment assistance, day habilitation or acquiring daily living skills; and accessing transportation and other housing assistance, if needed. Other assistance includes obtaining adaptive assistance aides or equipment, specialized therapies, and referrals to help young adults' transition from care. DFPS works closely with other state agencies offering long-term supports through Medicaid waiver programs such as Home and Community-Based Services that provides a comprehensive array of services, including residential services to support their success in the community.

### **Texas Youth Helpline**

The Texas Youth Helpline is a resource for parents and youth up to 21 years of age, including those who have aged-out of care. Youth may contact the Helpline for toll-free telephone counseling and referrals if they are thinking about running away. The Helpline can also help young adults locate services available in their communities. The Helpline provides chat and text options in addition to the toll-free number. DFPS transitional living services staff makes regular efforts to ensure Helpline resource information is current.

### **Outreach**

Outreach efforts to youth and young adults includes flyers, newsletters, brochures, training, local and statewide teen and college conferences, Youth Take Flight for Success Seminars, youth development events and activities, memos to foster care providers, program updates to external partners, and networking with residential treatment centers, homeless shelters, and transitional living facilities. Regional Youth Leadership Councils assist in getting the word out about Youth Take Flight for Success Seminars to eligible youth. DFPS staff, stakeholders, youth, and young adults contribute to DFPS website information updates.

The phone, in-person, and mail continue to be the most frequently used methods to complete the National Youth in Transition Database survey. DFPS no longer has a Texas Youth Connection Facebook page, as the majority of youth identified Instagram as their preferred social networking choice. Instead, DFPS now has an Instagram page called Youth Take Flight (<https://www.instagram.com/youthtakeflight/.Positive>) featuring success stories, motivational and uplifting quotes, and resource information.

DFPS does not have a singular awareness campaign on the needs of youth in care, but instead relies on regular Instagram postings, the *Texas Foster Care Handbook for Children, Youth and Young Adults*, feature stories on DFPS internal e-newsletter called "DFPS Delivers", flyers and brochures for specific programs, and the National Youth in Transition Database. Updates to the Transitional Living Services program section of the public website are made regularly through coordination with the DFPS Communications division department to maintain the webpage.

**States or tribes that have amended their title IV-E plan to offer extended foster care to eligible youth to age 21 or are operating a comparable program for youth up to age 21 through state or tribal funding may offer services outlined in purpose #4 to youth up to age 23.**

**5. Make available vouchers for education and training, including postsecondary education to youth who have aged out of foster care.**

The Education and Training Voucher program is administered statewide through a DFPS contract with Baptist Child and Family Services Health and Human Services of San Antonio. A five-year renewal on this contract was executed in October 2018 ending in September 2023. Due to the Supporting Foster Youth and Families through the Pandemic Act, the contract was amended as of April 2021 to extend Education and Training Voucher services to eligible youth up to age 27 and allow for the other flexibilities the Act provided, including payment for items and services not a part of the student's cost of attendance and the suspension of the requirement to make satisfactory progress toward completion. These flexibilities and increase in age eligibility were effective through September 2022. From September 2021 to September 2022, the normal age of eligibility increased from 23 to 25 years old. After September 2022, the age of eligibility returned to 23 years old. DFPS will continue to explore the feasibility of an increase in age in the future.

The contractor works closely with each region and the transition centers and operates a personalized, individualized model with special attention to youth and timely distribution of information and awards. An electronic Education and Training Voucher application is available at <http://discoverbcfs.net/texasetv> to further streamline services for students. Paper applications are also available, as well as a toll-free number for questions about the program. The contractor uses informational services provided by the Texas Higher Education Coordinating Board to maintain current information of postsecondary education schools cost of attendance, collects demographic information, and tracks youth

For fiscal years 2021 and 2022, enrollment and new applications in the Education and Training Voucher program decreased. Some of this decrease can be attributed to the pandemic; however, the contractor has identified other enrollment issues that may be contributing factors, including:

- Not meeting the school policies for satisfactory academic progress with a drop in the grade point average affecting continued financial aid eligibility;
- Exceeding the cost of attendance for students applying for loans and then applying for Education and Training Voucher funds without understanding the impact;
- Not accessing all funding available even when reminders are sent from staff;
- Not sending all documents to complete the application process despite follow up from the staff;
- Lack of awareness of the program, as contractor outreach surveys indicate.

The Education and Training Voucher program contractor continued to prioritize improving services in federal fiscal years 2021 and 2022 as follows:

- More social presence with user-friendly updates to the Education and Training Voucher website and the addition of an Education and Training Voucher Facebook page;
- More flexibility with application deadlines and quicker processing times;
- Monthly follow up to pending applications to enroll youth sooner in the program;
- Increased outreach and communication with youth, staff, and the community;
- Partnerships with transition centers and DFPS Preparation for Adult Living staff and foster care liaisons to host Education and Training Voucher days;
- Implementation of mass email reminders for application open dates, deadlines, documents needed, etc., to both youth and staff;
- Implementation of a new chat feature on the Education and Training Voucher website; and
- Implementation of texting for follow up purposes with youth.

Contractor staff outreach to students to discuss the effects of loans and receiving the voucher, refer underperforming students to tutoring and mentoring resources available at college offices, and notify students about the need to access remaining fund balances and submit missing documents to complete the application. If the student is still living with their parent or guardian upon approval for the Education and Training Voucher program, they are required to enter into a rental agreement with the parent or guardian that describes each party's financial obligations for living expenses (e.g., housing, room and board, and utilities). Once the agreement is signed, the young adult is paid directly and is responsible for paying the parent or guardian per the rental agreement. This ensures parents are not directly being paid Education and Training Voucher funds meant for the young adult, and young adults learn financial management and responsibility.

The Education and Training Voucher program serves youth from out-of-state foster care who move to Texas to attend school, if funding is available; however, these students should continue to receive funds from their home state. Out-of-state students are provided contact information for their states' independent living coordinator if they were previously receiving funds in that state to inquire about continuing in the Education and Training Voucher program through their state of origin. If students are unable to access funds in their state of origin, the Education and Training Voucher program will still serve these students, as long as funding is available.

The DFPS Transitional Living Services team lead assumes certain responsibilities related to individual inquiries received about the program, monitors monthly data entry requirements, clarifies policy, provides training and technical assistance, organizes, and disburses information packets to educate and inform communities, and assists in the recruitment of youth participants. DFPS uses a handout in English and Spanish as an additional tool to inform students of the Education and Training Voucher program. These are distributed at various conferences, meetings, and venues to youth, staff, and stakeholders. The Education and Training Voucher program contractor created additional marketing materials for youth, providers, colleges, and other stakeholders and added a chat feature to their website to provide youth with another method of contact.

**6. Provide services to youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption.**

Youth subject of adoption assistance or permanency care assistance agreements after turning age 16 years old are eligible for the Education and Training Voucher program. Eligible youth aged 16 to 23 years old receive up to \$5,000 annually to cover the cost of attendance for higher education or vocational training.

As part of the Supporting Foster Youth and Families through the Pandemic Act of December 2020, Education and Training Voucher and Preparation for Adult Living services were temporarily extended to youth and young adults up to age 27 through September 2021. Then the Education and Training Voucher program was temporality extended to youth and young adults up to age 25 through September 2022. In addition, the cost of attendance was increased up to \$12,000 through September 30, 2022, as the availability of HR 133 funding remained.

These funds assist students in achieving their post-secondary educational goals. The caregiver may receive the permanency care assistance monthly benefit of up to \$400 for youth with a basic authorized service level need. These youth are also eligible for Medicaid. Youth who have left foster care after age 16 through adoption can also qualify for extended adoption assistance. This helps to defray some of the costs associated with adopting a youth with special needs. Other benefits include Medicaid coverage until age 21.

Any person adopted from DFPS conservatorship on or after September 1, 2009, and youth in DFPS conservatorship for whom permanent managing conservatorship was awarded to a person other than the student's parent on or after September 1, 2009, are eligible for the Texas college tuition and fee waiver.

Information and resource materials related to both the Texas college tuition and fee waiver and the Education and Training Voucher program are provided by DFPS staff, as well as posted on the DFPS and Education and Training Voucher contractor websites.

**7. Ensure children who are likely to remain in foster care until age 18 years of age have regular, on-going opportunities to engage in age or developmentally appropriate activities as defined in section 475(11) of the Act.**

Youth are offered opportunities both in the region and statewide to engage in age- or developmentally appropriate activities necessary to transition to successful adulthood. The Preparation for Adult Living program provides life skills assessments to 14- and 15-year-old youth in permanent managing conservatorship, as well as optional services, such as age-appropriate activities and trainings, for youth aged 16 to 20 years old; independent living supplies; and graduation expenses when not available from other sources. Life skills trainings include age-appropriate activities and normalcy opportunities. Opportunities for normalcy, however, apply to youth of all ages.

The Preparation for Adult program contracts for statewide conferences such as the Teen Conference with the University of Texas at Austin, College Conference with the University of Houston, and the Career and Technical Conference with Texas State Technical College-

Waco, to learn about life skills, interact with their peers, and have fun while learning. The Preparation for Adult staff provides Youth Take Flight for Success seminars to youth at age 17 to further enhance their Preparation for Adult life skills training classes and provide another opportunity to learn and engage with their peers. The Preparation for Adult staff provides regional teen and college conferences to further develop the youth's life skills and prepare for post-secondary educational decisions. The Preparation for Adult staff works with community providers to ensure youth celebrate their achievements by offering graduation celebrations, prom events, holiday events, and back-to-school nights. These events target promoting normalcy in addition to being informative. The CPS State Office and regional youth specialists regularly speak to youth and caregivers about the importance of engaging in age-appropriate activities. The Texas Legislature appropriated funds to support regional and statewide youth leadership activities, such as teen conferences, aging-out seminars and Youth Leadership Councils.

DFPS amended rules to strengthen the minimum standards for normalcy. The amendments added definitions for babysitting, normalcy, and unsupervised activities. Normalcy training requirements for licensed child-placing staff and caregivers have also specifically been added to minimum standards found in Texas Administrative Code, Title 26, Section 749.882. Staff and caregivers are required to have two hours of pre-service and annual normalcy training. DFPS has added the requirement to discuss normalcy in the child's plan of service, as well as youth permanency hearings.

**Report activities to coordinate services with other Federal and State programs for youth (especially transitional living programs funded under Part B of the Juvenile Justice and Delinquency Prevention Act of 1974, abstinence programs, local housing programs, programs for disabled youth (especially sheltered workshops), and school-to-work programs offered by high schools or local workforce agencies in accordance with section 477(b)(3)(F) of the Act.**

The Texas Juvenile Justice Department and DFPS State Office staff participate in quarterly meetings with regional DFPS staff to better coordinate federal Chafee Foster Care Independence Act programs and other services for older youth and those aging-out of care. Special management level meetings are held, if needed. As the state's IV-E agency, DFPS coordinates with the Texas Juvenile Justice Department for the pass through of IV-E funds for Texas Juvenile Justice Department and local/county juvenile probation department placements qualifying for IV-E funds. Changes are currently being discussed with the Texas Juvenile Justice Department regarding the IV-E program, regarding the proposed discontinuation of new youth added to the program and revisions to the program approach.

Historically, DFPS contracted with the Texas Juvenile Justice Department to provide life skills training for up to 25 youth placed in Title IV-E foster care by the Texas Juvenile Justice Department or a local and county juvenile probation department and maintain a child's service plan which includes a permanency goal of Another Planned Permanent Living Arrangement, Another Planned Living Arrangement Independent Living, or Another

Planned Living Arrangement Community Care. However, this contract was not renewed due to the Texas Juvenile Justice Department now has their own independent living program. Additionally, DFPS coordinates and provides aftercare room and board services for eligible young adults who have been placed by local and county juvenile probation departments in Title IV-E placements.

DFPS works with local, and county juvenile probation departments as needed to support efforts to coordinate service planning for youth and families who interact with both systems.

DFPS staff inform youth before they leave care about the Extended Foster Care and Supervised Independent Living programs and the positive advantages of staying in care past age 18 in order to meet their educational or employment goals. Youth and young adults are also informed about the option to return to care to prevent homelessness, achieve other goals or access other immediate services. DFPS has discussed with youth how to rebrand the Extended Foster Care program to avoid directly associating a young adult with being in "foster care."

The Preparation for Adult Living contract case managers refer youth and young adults to community housing services, such as homeless shelters, local housing authorities, and other transitional living programs offered by DFPS-contracted providers. A list of available housing resources is maintained in each region. Additionally, DFPS involves other state agencies to staff the more difficult cases where the risk of homelessness is greater because of the needs and challenges to a young adult.

In fiscal year 2021, the most recent National Youth in Transition Database data available, 31 percent of a random sample of 21-year-old young adults who took the survey at age 17 reported having been homeless which may include "couch surfing" in the last two years. DFPS has collaborative relationships with the Texas Education Agency, the Texas Workforce Commission, and HHSC to ensure youth transitioning from care and secondary school have the help and support they need to obtain skills for adult living, increased independence, and employment experience and jobs. The Texas Education Agency offers learning support and programs on career and technical education programs with a sequence of courses that provides students with coherent and rigorous content. This content is aligned with challenging academic standards and relevant technical knowledge and skills needed to prepare for further education and careers in current or emerging professions. Youth are offered the opportunity to participate in these programs if interested and as appropriate.

One of the more successful and ongoing initiatives involve building community consortia, which address and resolve barriers students in foster care face as they meet graduation requirements and move into the workforce or continue in completing their post-secondary opportunities.

DFPS and the Texas Workforce Commission share data regarding youth and young adults for the purpose of increasing the number of youths receiving employment and

supportive services. For calendar years 2021 and 2020, 65 percent of youth and young adults referred to local workforce offices or transition centers received a workforce service. DFPS and the Texas Workforce Commission renewed their agreement in 2021 to continue their efforts to provide youth currently or formerly in foster care priority workforce services. In addition, the 11 local DFPS regions have completed renewals or are in process of renewing local agreements with the 28 workforce solutions boards and corresponding transition centers. The transition centers were included in these renewals to better define and outline roles and responsibilities of each entity (i.e., DFPS, boards and transition center) in addressing the job readiness, career development and employment needs of youth and young adults currently or formerly in foster care.

These agreements improve educational, training, and employment outcomes for youth through effective workforce collaborations. Additional requirements include cross training of agencies, increased frequency of meetings between agencies for more accountability, and increase internship and apprenticeship opportunities. DFPS submits quarterly data on the number of Preparation for Adult Living eligible youth referred to workforce centers and transitions and receives a report back from the Texas Workforce Commission of those same youth who received a workforce service or transition center service from the workforce advocate. DFPS worked with the Texas Workforce Commission during this reporting period to improve the structure of the report and better understand the information provided. The Texas Workforce Commission started providing an additional report twice a year with skill demand data broken down by DFPS region to better assist youth and young adults in knowing employers' work expectations. DFPS staff, providers, and caregivers provide encouragement to youth and young adults to access local workforce solutions centers for employment and training related opportunities, benefits, and resources and register in the Texas job search system, Work in Texas. DFPS has partnered with the Workforce Solutions for North Central Texas to provide future internships. In addition, DFPS Regions 06 and 10 have offered formal internship opportunities.

DFPS coordinates with the Texas Education Agency, local school districts, and local workforce agencies to introduce youth to employment opportunities and trainings offered. Since Texas law prioritizes workforce services for youth, CPS works to ensure youth are enrolled in employment programs offered by local workforce centers. CPS has a point of contact list for each local workforce development board or center in case youth are having difficulty in accessing workforce services. Preparation for Adult Living staff receive updates to the contact list as provided. Having access to these contacts is beneficial to CPS staff and providers who assist youth with information about workforce programs and other employment services.

DFPS coordinated regular meetings with the Texas Workforce Commission vocational rehabilitation services staff to educate and strategize ways to increase the number of youth and young adults receiving services. The Texas Workforce Commission Vocational Rehabilitation staff provided presentations during this reporting period to multiple groups of DFPS staff (i.e., education specialists, Preparation for Adult Living staff, Circle of Support facilitators) and CASA to create awareness of their available services and how

to enroll youth.

If a youth runs away from care, DFPS reports the runaway to law enforcement and tracks the event in IMPACT. An IMPACT enhancement went live in April 2022 to provide an opportunity to capture the physical location of a youth when temporarily absent from a paid placement with an intent to return. DFPS has policy and protocols that have special staff assisting the caseworkers with efforts to locate youth who runaway. The regional director assistant serves as the missing child regional liaison to coordinate runaway issues between the special investigators and conservatorship staff and ensure regional protocols are in place for completion of regional reports. Staff notify the liaisons when a youth goes missing. The liaisons track this data for weekly reports to State Office. This information is reviewed monthly with the liaisons to ensure substantial efforts are made to locate the children. CPS makes efforts to ensure Preparation for Adult Living services are available to youth who return from runaway.

DFPS collaborates with the National Center for Missing and Exploited Children and DPS to promote a safe transition to adulthood by reducing the human trafficking risks to youth and young adults. The DFPS website contains human trafficking information with the National Human Trafficking Hotline, YouTube public service announcements, and regional resources and contacts. This information is shared through the Preparation for Adult Living program at Youth Take Flight for Success seminars, statewide and regional teen conferences, and Circle of Support meetings. Staff are required to complete a webinar training on human trafficking.

The Office of the Governor, the Texas Workforce Commission, and the DFPS Child Sex Trafficking team identified a need to serve victims aged 16 to 25 years of sex trafficking and deter repeat victimization of these youth. The Texas Employment Empowerment Model for Disenfranchised Youth and Young Adults pilot has been developed in response to this need with the goal of developing a tailored process and experience lead by a training and employment navigator to increase the chance of finding and maintaining employment.

Four local workforce development boards were identified as participants in this pilot due to the number of local sex trafficking victims and the availability of an area foster youth transition center to provide referrals to this pilot. The boards are as follows:

- Dallas – City Square – TRAC – Dallas;
- Gulf Coast – HAYS Center;
- Alamo – Baptist Child and Family Services Health and Human Services of San Antonio; and
- North Central – City Square TRAC – Fort Worth.

North Central has no board, so either City Square Dallas or Fort. Worth can serve that area.

Each board will hire at least one employment and training navigator who will receive training from the Child Sex Trafficking team in the Office of the Governor. The navigator

will guide each participant through the workforce center processes. Additional navigators may be added with additional funding, if needed. The participants will be referred from only two sources: child sex trafficking team advocates or the foster youth transition centers. The navigator will be the only contact for the participant, other than training, who will provide specialized intake and assessment, determine needs, and training. The navigator will also identify a committed pool of Texas employers who will commit to hire and support program participants.

As mentioned above, all child-placing agency administrators, treatment directors, child placement staff, child placement management staff, and full-time professional service providers, except those exclusively assigned to provide adoption services must receive two hours of pre-service and two hours of annual training regarding normalcy, including the prudent parent standard. This must be completed before the person can be a designated person who makes decisions regarding a child's participation in childhood activities. DFPS staff (i.e., caseworkers, and Foster/Adoptive Development and Kinship Development staff) are required to provide Preparation to Adulthood experiential training. Providers are expected to utilize the following newly updated guides and tools.

CPS provides training to unverified relative and kinship caregivers through kinship development workers. Training includes, but is not limited to, defining permanency, recognizing the importance of participation in normalcy activities, supervision and applying reasonable and prudent parent standard, and assessing age-appropriate activities. Since this is state mandate, licensing standard, and DFPS policy, each child-placing agency offers it as a part of pre-service and annual training requirements. DFPS delivers this training through classroom, webinar, and in-person training throughout the year.

Youth in DFPS conservatorship are able to obtain contraceptive services through Medicaid-approved programs. Preparation for Adult Living staff and contractors refer and provide resources available to youth and young adults in their communities. Information is disseminated in Preparations for Adult Living life skills training classes about sexual responsibility, healthy relationships, and resources. The Texas Teen Conference scheduled for July 2023 will offer a workshop on sexual responsibility. The DFPS Prevention and Early Intervention division offers pregnant and parenting teens in DFPS foster care parenting education and basic needs support through the Helping through Intervention and Prevention program. This initiative began in 2014 and is designed to provide services to high-risk families with newborns. A young adult over age 18 who is pregnant, or parenting may be referred from the Extended Foster Care and the Preparation for Adult Living programs to the Helping through Intervention and Prevention program. This program provides home-based assessments and a home visiting program. ([https://www.dfps.state.tx.us/Prevention and Early Intervention/About Prevention and Early Intervention/programs.asp#hip](https://www.dfps.state.tx.us/Prevention%20and%20Early%20Intervention/About%20Prevention%20and%20Early%20Intervention/programs.asp#hip)).

This program is offered in a limited number of DFPS regions and Texas counties.

**Describe any activities undertaken to involve youth (up to age 21) in the**

**CFCIP plan and other State agency efforts such as the CFSR/PIP process and agency improvement planning efforts.**

DFPS engages youth and young adults in all aspects of agency work including the development of policy and best practices at the local, state, and national levels. Youth in care and alumni participate as partners and advisors. These youth and young adults attend leadership trainings with CPS managers, participate on advisory committees, and conduct presentations with CPS staff. The statewide Youth Leadership Council representatives meet three to four times a year via conference calls or in person to address issues and formulate recommendations for improving services to children and youth in care and those preparing to age-out of care, including developing or modifying action steps and strategies in the DFPS Title IV-B Child and Family Services Plan.

DFPS receives ongoing input from youth and young adults through evaluations provided at the conclusion of contracted service and events, from Youth Take Flight for Success Seminars and through one-on-one contact with DFPS staff and CPS leadership. During these meetings and events, DFPS staff receive input from youth and young adults on improvement activities related to the National Youth in Transition Database, Child and Family Services Review statewide assessment development, and Chafee Foster Care Independence Program efforts. Normalcy activities are a part of quarterly structured case readings. Regional and statewide Youth Leadership Council members provide input into the continuous quality improvement of Chafee Foster Care Independence Program, National Youth in Transition Database and Child and Family Services Review activities and services. National Youth in Transition Database data is shared with youth during regional and statewide events, aging-out seminars, and regional and statewide Youth Leadership Council meetings.

DFPS collaborates with the Texas Network of Youth Services, the Texas Alliance of Child and Family Services, youth at regional and statewide youth councils, field staff, and other external partners for feedback on meeting the needs of Chafee-eligible youth.

**Describe, if applicable, how the State utilizes, or plans to coordinate with the state Medicaid agency to implement provisions of the Patient Protection and Affordable Care Act (ACA) that requires mandatory medical coverage to individuals who are under the age of 26, were in foster care under at age 18.**

DFPS and HHSC developed a process for youth to access Medicaid coverage as seamlessly as possible. The Former Foster Care Children program provides continuous healthcare coverage through age 25 to young adults who age-out of Texas foster care and receiving Medicaid at that time.

These young adults are eligible to receive services in two separate programs based on age. Young adults age 18 to 20 years are enrolled in STAR Health, and young adults age 21 to 25 years receive Medicaid through the STAR plan of their choice. The Medicaid for Transitioning Youth continues to be available for young adults up to age 21 who were

otherwise not eligible for the Former Foster Care Children program. This category covers youth who age-out of foster care and are not receiving Medicaid, such as youth who at age 18 still had an immigration application pending with the United States Citizenship and Immigration Services. DFPS continues to ensure information is available to Medicaid-eligible older young adults who do not have regular DFPS staff contact, such as young adults 21 years and older. Information about the STAR and STAR Health Services is available at: [http://www.dfps.state.tx.us/Child\\_Protection/Youth\\_and\\_Young\\_Adults/Transitional Living/medical\\_benefits.asp](http://www.dfps.state.tx.us/Child_Protection/Youth_and_Young_Adults/Transitional_Living/medical_benefits.asp).

Current and former youth in DFPS conservatorship who reside in another state are covered under the Medicaid for Transitioning Foster Care Youth Program if there is an Interstate Compact for the Placement of Children in place.

HHSC does not automatically provide Medicaid services to both young adults who aged-out of care from another state and moved to Texas and young adults who aged-out of Texas foster care and moved to another state. These young adults are advised by DFPS staff to apply for other Medicaid services available in the state they currently reside and provided 2-1-1 information on other Medicaid or healthcare programs available to them in Texas.

The National Youth in Transition Database outcome data provides DFPS with Medicaid coverage data at ages 17, 19, and 21. In fiscal year 2021, the most recent National Youth in Transition Database results available reported 67 percent of the random sample of 21-year-old young adults who took the survey at age 17 had Medicaid coverage and 7 percent reported having other health insurance. Revisions were requested during the IMPACT modernization project. This update was determined to need internal completion though DFPS IT outside of this project. Survey explanation updates needed were provided to IT, but this update remains on a list for future completion. Input was received at the July 2017 statewide Youth Leadership Council Meeting to ensure the terminology is more youth friendly and Texas specific which may affect outcome responses about Medicaid coverage. At the direction of the Office of the Governor in response to the federal Families First Coronavirus Response Act, P.L.116-127, (HR 6201) and in collaboration with DFPS, HHSC took steps to ensure no Medicaid recipient was discontinued for Medicaid coverage during the COVID-19 crisis.

Information about the Former Foster Care Children program is provided to youth during Circles of Support, transition planning meetings, Preparation for Adult Living services, and aging-out seminars, as well as to young adults participating in the Extended Foster Care program, and through the Texas Youth Connection and DFPS public websites. Young adults access the 2-1-1 system and the Your Texas Benefits self-service portal ([www.YourTexasBenefits.com](http://www.YourTexasBenefits.com)) to make changes and apply or re-apply for benefits. People can now download the Your Texas Benefits mobile app to their phones to find a HHSC office, create an account, report changes such as addresses, check the status of their case, upload documents, and sign up for alerts.

A two-page Medicaid healthcare coverage chart is used as a handout for young adults. HHSC has developed a training presentation for Preparation for Adult Living staff and other DFPS staff, as well as people in the community.

The DFPS Transitional Living Services team is available to coordinate with HHSC in rolling out Medicaid services to eligible young adults formerly in foster care who move to a new state after January 1, 2023. DFPS Transitional Living Services team provided HHSC with the current DFPS foster verification process for youth in another state. HHSC is developing a contingency processing method until automation changes can be implemented and issued a staff bulletin about the new policy and contingency processing method in May 2023.

**Describe the results of the Indian Tribe consultation (Section 477(b)(3)(G)), specifically, as it relates to determining eligibility for benefits and services and ensuring fair and equitable treatment for Indian youth in care:**

The tribes have not expressed any concerns about accessing the PAL or the Education and Training Voucher programs. Baptist Child and Family Services reports no tribal students applied for the Education and Training Voucher for the 2021-2022 fiscal year. DFPS entered into a Title IV-E agreement for the purposes of IV-E eligibility with the Alabama Coushatta Tribe on April 12, 2012; however, it was not renewed after fiscal year 2016. DFPS continues to discuss Title IV-E state/tribal agreements with the other two Tribes, Ysleta Del Sur Pueblo/Tigua, Kickapoo, Traditional Tribe of Texas. Preparation for Adult Living or other DFPS staff coordinate and conduct biannual in-person meetings with the three federally recognized Native American Tribes in Texas to discuss the provision of transitional living services, including Chafee Foster Care Independence Program services and Native American youth eligibility. Preparation for Adult Living staff provide each Tribe with updated eligibility and service information for the Preparation for Adult Living and the Education and Training Voucher programs, as needed and upon request. Preparation for Adult Living staff is available to train the Tribal staff about applying for the Education and Training Voucher program through its website at [www.texasetv.com](http://www.texasetv.com). DFPS State Office staff annually presents updates on Chafee benefits to the three Texas Tribes at biannual Tribal-State meetings and seek their consultation on the adequacy of services provided to tribal youth. Contacts for Chafee Foster Care Independence program services this year include the following:

- **Region 05** – DFPS Preparation for Adult Living and Foster Adoptive Home Development staff met with the Alabama Coushatta Tribe social service director and caseworker on January 27, 2022, to share transitional services and Preparation for Adult Living benefits information, including the Education and Training Voucher program, life skills training, and the use of the Casey Life Skills Assessment as a tool and resource. Additionally, National Youth in Transition Database surveys and data were discussed, as well as foster youth services available through the Texas Workforce Center and newest version of Brief of Transitional Living Services and HR133 funds available. Region 05 Preparation for Adult Living staff and the service program administrator contact information was also provided. The Alabama Coushatta Tribe has a youth receiving Preparation for Adult Living services, the Casey Life Skills

Assessment, life skills training, and transition and financial support services.

- **Region 08** –Due to COVID restrictions, the scheduled DFPS in-person meeting with the Kickapoo Tribe did not occur. A virtual meeting also was unsuccessful after repeated scheduling conflicts; however, DFPS shared updated Preparation for Adult Living benefit and staff contact information electronically with the Tribe. During fiscal year 2022, no referrals were received from the Kickapoo Tribe.
- **Region 10** – The Preparation for Adult Living program will continue to work with the Ysleta Del Sur Pueblo/Tigua Tribe to help youth continue their heritage and have access to available programs. Region 10 currently has no Preparation for Adult Living-aged youth who are tribal members. DFPS has open communication with the Tribe and will set up an informational meeting when a tribal youth is identified. The Tigua Tribe has many employment and educational opportunities available.

The Tribes have expressed no concerns about accessing the Preparation for Adult Living or the Education and Training Voucher programs. The Preparation for Adult Living contractor reports no tribal students applied for the Education and Training Voucher for fiscal years 2021 and 2022.

#### **Report on the state’s CFCIP specific accomplishments achieved since the 2021-2024 CFSP and 2023 APSR submission.**

DFPS provides statewide Chafee Foster Care Independence and state-paid program services and benefits through its Transitional Living Services program, which incorporates Preparation for Adult Living, Education and Training Vouchers, and other related services in support of youth and young adults ages 16 to 22, and in some cases age 23, who are currently or formerly in foster care or transitioning out of care. In addition, the life skills assessment is provided to youth in DFPS permanent managing conservatorship at age 14 and 15 years old. Other services are provided as funding or resources are available to youth ages 14 and 15. Furthermore, periods of fiscal years 2021 and 2022 saw an increase to the eligibility age to either 24 or 26 years old for some Transitional Living Services programs due to federal direction received for pandemic funding.

DFPS updated policy and other documents to include the language “transitioning to a successful adulthood.” When information is identified with the former language "independent living", efforts are made to update the materials.

As a result of internal audit recommendations, the life skills training online curriculum was published in the *CPS Policy Resource Guide* to meet the auditors’ recommended changes to the financial management and life decisions and responsibilities core element sections. A standard quality review process for life skills training class observations was implemented for consistency and uniformity statewide, including ratings criteria and separate evaluations for trainers or guest speakers. Preparation for Adult Living staff shares results of the completed reviews with contract staff and the State Office for contract performance monitoring. The audit recommendations formalized a review process for life skills training and case management services when the contract is on the statewide monitoring plan. Preparation for Adult Living staff now monitor for quality and content of services provided by a contractor, and contract managers continue to monitor

for contract compliance (programmatic and fiscal). Monitoring tools (forms) and a process guide are being utilized.

In an effort to increase completion of life skills training by youth 18 years and older who leave substitute care, the *Independent Study Guide* was revised, and a paper version was completed for those youth who do not have computer access. An additional revision began during fiscal year 2020, and DFPS released revision of the study guide in Summer 2021, including work from community partners and feedback from a large group of youth and young adults with lived experience in care.

### **CPS Rights for Children and Youth in Foster Care (Foster Care Bill of Rights) Updates**

CPS made changes to the Rights of Children and Youth in Foster Care by adding two new rights related to children and youth being kept informed about any investigations involving them and the outcomes of any complaints made to the Ombudsman for Children and Youth. These updates were finalized in fiscal year 2020. Additional updates occurred in October 2021 to align three rights with current policy and contracts/Minimum Standards, as well as clarify time frames for when a youth must have their personal documents.

### **Personal Documents-Federal and State Legislation**

DFPS currently provides certain personal documents and other information to a youth:

- When a youth exits DFPS conservatorship;
- When the youth ages-out; or
- Before age 16; and before the youth turns age 18.

DFPS provides a copy and the original or certified copy of the youth's birth certificate, Social Security card, and a state identification card before age 16. Just prior to age 18, DFPS provides the youth their birth certificate, Social Security card, and state identification card 30 days before leaving care, unless the youth already has these documents. The youth and caregiver now sign a form to indicate receipt of these documents.

DFPS ensures each youth who is 14 years of age or older has an email address through which the youth may receive encrypted copies of personal documents and records, even after the youth leaves conservatorship. DFPS provides youth with instructions on how to access encrypted emails.

DFPS provides youth ages 16 and 17 years old with encrypted flash drives containing their important documents.

### **Credit Reports**

The caseworker notifies youth ages 14 to 18 years old when their credit report was processed. These reports are batch processed annually until the youth is discharged from DFPS care or turns 18. An email address ([CPSCreditReports@dfps.state.tx.us](mailto:CPSCreditReports@dfps.state.tx.us)) is available for staff to submit individual credit report requests or seek technical assistance.

### **Post-Secondary Education Event**

The 2022 Education Reach for Texas conference was held virtually June 8-9, 2022. The 2023 conference returned to in-person programming on April 3-4, 2023, at Texas State University in San Marcos. DFPS Transitional Living Services staff helps plan these annual conferences and conducts workshops to inform the college foster care student liaisons about youth and transitional living services with topics such as accessing benefits for former foster youth, building better partnerships between Preparation for Adult Living and post-secondary staff, and youth housing programs and partnerships.

### **Human Trafficking**

The *CPS Handbook* includes human trafficking requirements as it relates to the federal legislation. The Preparation for Adult Living life skills training curriculum includes training available services and supports for victims of human trafficking, including reporting alleged abuse to local law enforcement. Life skills training and Preparation for Adult Living contracts for case management services include this same information.

DFPS website contains information on human trafficking and resources. DFPS updated provider contract sections on the Education and Training Voucher website resources on human trafficking to include Preparation for Adult Living staff or the 800- number for assistance. The Transitional Living Services team partners with the DFPS Human Trafficking division to ensure policies across the agency are current and consistent.

### **College Foster Care Student Liaisons and Memorandum of Understanding-State Legislation**

State colleges and universities are required to appoint foster care student liaisons. State law also requires DFPS and the Texas Higher Education Coordinating Board to enter into a MOU to exchange information to facilitate the evaluation of educational outcomes for former foster care students, including:

- CPS will provide annually a demographic information of former foster care students enrolled in state colleges/universities to the Texas Higher Education Coordinating Board;
- The Texas Higher Education Coordinating Board will provide CPS aggregate data on the identified educational outcomes with demographic information received;
- CPS and the Texas Higher Education Coordinating Board will determine what educational outcomes will be included student academic achievement, graduation rates, attendance, and other outcomes identified and relevant to the purpose of the evaluation;
- CPS may authorize the Texas Higher Education Coordinating Board to provide education research centers demographic information to perform additional analysis for educational outcomes only for youth in foster care.

This MOU was renewed in July 2022 and DFPS provided the Texas Higher Education Coordinating Board with data in March 2023. This data included previous annual data and new current data utilizing an updated agreed upon methodology. DFPS will work with

the Texas Higher Education Coordinating Board to create an annual report analyzing this data exchange. The report will be shared with CPS staff, stakeholders, and members of the Children's Commission and the Post-secondary and Secondary Education workgroup.

### **Reasonable and Prudent Parent Standard-State Legislation**

Statute empowers substitute caregivers to approve or disapprove a child's participation in activities based on a caregiver's own assessment and availability to help facilitate a child's access to these activities, using reasonable and prudent parent standards, without prior approval of DFPS. CPS policy specifies that, unless indicated on the child's plan of service, the caregiver may make decisions regarding normalcy activities based on the use of the reasonable and prudent parent standard. Webinars were used for staff to ensure they understand the importance of normalcy for all foster children and youth and staff receive refresher training on an annual basis.

### **Public Private Partnership**

The Public Private Partnership was appointed as the group to assist with Foster Care Redesign and the new model, Community Based Care. The partnership includes participation by a young adult formerly in foster care, as well as members of the judiciary, foster care providers, advocates, provider associations, a DFPS Advisory Council member, and DFPS executive staff.

### **Improve activities related to National Youth in Transition Database, Child and Family Service Review, and Chafee Foster Care Independence Program**

During Youth Take Flight for Success seminars and other youth events, DFPS staff receive input from youth and young adults about ways to improve activities related to National Youth in Transition Database, Child and Family Service Review, and Chafee Foster Care Independence Program services. As a result, normalcy activities are now a part of structured quarterly case readings. Regional and statewide Youth Leadership Councils are other venues where youth and young adults provide input into the continuous quality improvement of National Youth in Transition Database, Child and Family Service Review and Chafee Foster Care Independence Program activities and services.

National Youth in Transition Database data is shared with youth during regional and statewide events, Youth Take Flight for Success seminars, Circle of Support meetings, and regional and statewide Youth Leadership Council meetings. Use of ACF data snapshot materials has aided discussions with ease of comprehension for the youth. Preparation for Adult Living staff continue to increase their efforts to share the National Youth in Transition Database data with stakeholders by sharing in a variety of ways, such as during meetings with the following stakeholders: CASA, Tribal representatives, internal DFPS foster parent trainings, DFPS caseworkers, child-placing agencies, and Preparation for Adult Living providers, as well as court hearings. Based on these discussions, efforts have been made to increase employment opportunities and relationships with workforce boards, the number of youths who go on to pursue post-secondary education, the number

of youths who complete life skills training, and the number of Available adult mentors, an essential piece to a youth's success. An annual report template completed by regional Preparation for Adult Living staff includes progress on these efforts. Below is an example of an annual report template question and its responses.

### **National Youth in Transition Database (NYTD).**

Describe regional efforts made with the following:

- Discussion of National Youth in Transition Database data with stakeholders to include youth, courts, and other stakeholders;
- Service improvements made as a result of National Youth in Transition Database data results; and
- Break down of any National Youth in Transition Database data with other system data available to region and used to determine any local patterns and trends for example in the areas of housing or education.

The following represent some regional examples of improvements that are in process.

- **Region 01** – The SSCC contractor shared National Youth in Transition Database data during conservatorship staff unit meetings and through the virtual education consortium meetings for both Lubbock and Amarillo. Meetings are scheduled with CASA of Lubbock to share this information.
- **Region 02** – The SSCC contractor shared National Youth in Transition Database data during conservatorship staff unit meetings and utilized it to better serve their youth.
- **Region 03** – National Youth in Transition Database data results discussions are ongoing with the Preparation for Adult Living contractor through contract meetings to tailor services to better suit the needs of youth and young adults. Region 3 has strengthened its relationships with local courts, workforce boards, and CASA by meetings with these entities regularly to share ideas and resource information to help youth to gain employment. The data is also discussed with youth in their Circles of Support, as well as at the aging-out seminars and Youth Leadership Council meetings. The SSCC contractor is expanding its use of the data to reach area youth in their area by facilitating conversations with them on post education, career planning, building a support system and the use of TRAC for aftercare services. The SSCC contractor has plans to do more with National Youth in Transition Database survey information in the future to identify areas of needs for the youth served and offer a more robust array of transitional supports in the community.
- **Region 04** – National Youth in Transition Database data is shared with youth in “Welcome to PAL” packets. The data is also shared with youths during aging-out and teen conferences, and Youth Leadership meetings, as well as with stakeholders, caseworkers, and caregiver. Region 4 is working with caseworkers and disability and education specialists to reduce the numbers of youth experiencing homelessness. The education level of 17-year-olds is reviewed to determine their progress toward achieving graduation. Furthermore, education specialists must identify at-risk youth and assist them with progress toward graduation. Region 4 is searching for supportive facilities and programs that may help in the reduction of homelessness. During Circle of Support meetings, homelessness is discussed with the youth in a realistic manner,

and the youth receives assistance is assisted in creating a plan for aging-out of foster care. Identifying youths who have a pattern of numerous placements and lack of supportive connections along with incomplete education is the key to reducing homelessness. The need for personal documents (e.g., birth certificate, social security card and state identification) is also discussed with the conservatorship caseworker and supervisor to create a timeline for securing the documents prior to the youth turning 16 years old.

- **Region 05** – National Youth in Transition Database data is shared in Preparation for Adult Living aftercare provider quarterly meetings to inform the work of services provided. Youth also received the data and provided literature during the Youth Leadership Council meeting and Regional Teen Conference in July 2022. The importance of identifying a stable, caring adult was discussed in addition to maintaining and providing accurate contact information. During the Circle of Support meeting, a caring adult is identified for each youth. This meeting also includes suggestions of keeping addresses updated through 2-1-1, Medicaid, and SNAP. National Youth in Transition Database incentives with youth are mentioned and upcoming reporting periods discussed with youth to provide readiness for the surveys. Also, the data was discussed at the quarterly meeting with T.R.A.I.L.S., the aftercare service provider for transition and financial support services. Utilizing the Texas Workforce Commission advocate to increase awareness of the workforce center and programs were discussed.
- **Region 06** – Ongoing discussions of National Youth in Transition Database data occur throughout the fiscal year to identify areas for improvement with residential providers, foster parents, child-placing agency staff, caregivers and other stakeholders. A range of other meetings with service providers and legal stakeholders also included this information sharing and discussion, including meetings with Fostering Hope, Collective Action for Youth, Dress for Success, CASA of Galveston County, and Angel Reach.
- **Region 07** – National Youth in Transition Database data discussions with youth occur during their Circle of Support conferences, transition planning meetings, and most presentations regularly throughout the fiscal year. The data is also discussed during Preparation for Adult Living presentations to caseworker unit meetings biannually and community partners. National Youth in Transition Database results help Region 7 stress to youth the importance of making connections and having a support system or a connection to a caring adult, as well as Preparation for Adult Living staff to encourage youth with future educational or vocational plans. The data shows an increase in housing services for youth is possible.
- **Region 08** – Staff has continued to discuss information about the National Youth in Transition Database surveys and previously reported data with youth at aging-out seminars, Youth Leadership Council meetings, and other community meetings, such as the Interagency Foster Care Collaboration. The importance of the surveys and its effects on fiscal year budgets is expressed to youth. DFPS Preparation for Adult Living and conservatorship staff met on a quarterly basis to discuss foster care transition and the importance of keeping the accurate and updated education logs, since it does have the potential to affect Preparation for Adult Living federal funding. National Youth in Transition Database information is also shared at the Inter-Agency Foster Care

Committee meetings with the child-placing agencies. Preparation for Adult Living staff have made efforts to increase the information and resources available in both housing and education and continued to attend and provide information to The Interagency Foster Care Collaboration. Housing options have increased through SARAH and other community partners, as well as DFPS programs like Supervised Independent Living, and now Foster Youth to Independence vouchers through Bexar County Housing Authority. A specific Preparation for Adult Living staff person handles return to care and other placement options if return to care not possible or undesired. This streamlines the process through collaboration with DFPS placement and conservatorship staff, out of care placements, Community-Based Care, and the Preparation for Adult Living contractor. A Preparation for Adult Living staff person is also assigned to act as an education liaison to work with local schools and colleges and share program information and benefits. They also track important regional contacts and services provided by the schools. This staff also works with the Bexar County Fostering Educational Success program on the issue of college enrollment. These include monthly meetings and work groups which are attended by the designated Preparation for Adult Living staff.

- **Region 09** – National Youth in Transition Database data discussions occurred with conservatorship staff throughout the fiscal year, as well as at unit staff meetings. Information is also disbursed at the two Foster Care Coalition groups, as well as with youth at Youth Leadership council meetings and regional Preparation for Adult Living events. Emphasis is placed on the number of homeless youths, and housing solutions. The University of Texas Permian Basin began quarterly meetings to assess community needs and services to assist in finding community solutions. National Youth in Transition Database information and the critical areas are discussed, and ideas are shared. Committee members are from the areas of mental health, housing, post-secondary and secondary education, workforce, and child-placing agencies, as well as interested community members. Housing has been a primary issue in the region. Resources include a Supervised Independent Living program at Angelo State University, a HUD Foster Unification Program in San Angelo, a HUD Foster Youth to Independence program in Midland, Andrews, and Odessa, as well as a private transitional program with Housing in Midland, Basin Dream Center for orphans with housing available for single males and females
- **Region 10** – National Youth in Transition Database information was shared with CASA volunteers, child-placing agencies, Preparation for Adult Living contract providers, CPS staff, youth at Circles of Support, aging-out seminars, Youth Leadership Councils, educators, and other local conferences. Presenters experience general appreciation on DFPS' continued feedback from young adults. Overall, there is no feedback, but stakeholders request more information on the youth survey methods which is provided. The data to utilized for planning youth events, such as aging-out seminars and teen conferences, focusing on the areas with data-identified need. For example, 2020 data shows a need for employment-related services improvement. As result, regional staff is building a solid relationship with Texas Workforce Borderplex to meet with these needs by providing training on interview skills, resume writing, and job placement. The youth were provided workforce information at their Circle of Support meetings.

- **Region 11** – National Youth in Transition Database quarterly data presentations include DFPS staff and external stakeholders, such as CASA, child-placement agencies, and the Preparation for Adult Living contractor. Service improvement has continued due to normalcy data results. Presentations on Normalcy at Circle of Support meetings continues to be a priority. Region 11 has established partnership with Cameron Workforce to explore more workforce meetings and on the job training for youth. COVID-19 limited some of these interactions, but communication with these organizations continues.

All regions continue work toward increasing life skills training completion rates for the number of youths who leave substitute care at age 18 or older. Youth were surveyed previously on their preferred method of training, incentives, and opportunities to practice life skills in their placement. Survey results were shared with internal staff to help with locating potential incentives for youth completing the training. General results were shared with a statewide workgroup working on recommendations to enhance life skills training. A high percent of youth surveyed prefer classroom training over online training which will be considered during the workgroup discussions.

National Youth in Transition Database data collection has continued to improve. Regular technical assistance is provided by the State Office to staff who input the information into IMPACT system. Additionally, a National Youth in Transition Database manual is available to staff when questions arise, or data collection details are needed. The DFPS State Office continues to cross-reference Preparation for Adult Living contract provider documentation IMPACT data entries prior to National Youth in Transition Database submissions. Provider training and document correction efforts have increased the accuracy and consistency of data entry statewide. Texas continues to offer a cash incentive to youth ages 19 and 21 of \$50 and \$100 respectively, to complete the survey and maintains regular contact with the random sample of survey participants which has contributed to a high survey completion rate. Also, Texas continues to utilize the statewide Preparation for Adult Living staff to enter service data and collect survey outcomes data. Having a well-trained, small group to enter this data has contributed to success. Texas has been in compliance with National Youth in Transition Database reporting requirements since data collection started in 2010.

Texas is not currently on the federal National Youth in Transition Database review schedule for fiscal years 2022 and 2023; however, Texas volunteered and successfully participated in a federal review in 2013. Since the review, Texas has made improvement efforts based on-site visit recommendations like correcting some data reporting methods and system mapping. Once Texas is notified about a review date, general and personal notifications will go out to appropriate internal and external stakeholders to outline how input will be helpful to the review. Since Texas has experienced a prior review, lessons learned will carry forward with any future reviews.

Preparation for Adult Living staff continue to disseminate and discuss recent Texas National Youth in Transition Database data results with DFPS staff, youth, and community partners, such as CASA, post-secondary institutions, judges, and contract providers. Staff

will assess input and incorporate suggestions to improve services or data collection going forward.

### **Education and Training Voucher program for Tribal Youth**

Preparation for Adult Living staff informs and is available to train Tribal staff on youth applying for the Education and Training Voucher program through its website at ([www.texasetv.com](http://www.texasetv.com)). The Preparation for Adult Living contractor is available to meet with Tribal representatives and youth application assistance. Education and Training Voucher contractor is contractually has been required to perform outreach and marketing activities to Tribes since 2017. Contact information is available on the program's website or from the Preparation for Adult Living staff. DFPS has received no suggestions from Tribes for improvement of National Youth in Transition Database data collection. Preparation for Adult Living staff keeps in contact with the Tribes about National Youth in Transition Database survey participation eligibility and request their participation from their youth and young adults. As reported by the contractor, no Tribal youth has applied for the Education and Training Voucher program as of April 2023.

## **B. Education and Training Vouchers Program (ETV)**

- *Briefly describe the services provided since the submission of the 2023 APSR, highlighting any changes or additions in services or program design for FY 2024 and how the services assisted or will assist in establishing, expanding, or strengthening program goals.*
- *Provide an update on the state's efforts to engage or re-engage students whose post-secondary education has been disrupted by the COVID-19 pandemic and national public health emergency.*
- *Describe any collaborative efforts with college campus support programs designed to increase student enrollment, retention, and graduation.*
- *Division X Additional Funding from the Supporting Foster Youth and Families Through the Pandemic Act.*
  - *Provide the final update information on how the agency used the additional funding provided by Division X.*
  - *Describe accomplishments to date in using this supplemental funding to assist young people, including available quantitative information on the numbers of youth/young adult assisted and available information on the characteristics and demographics of youth assisted.*
  - *Describe any challenges or barriers the state has experienced in being able to use the additional ETV funds.*
- *If applicable, address any change in how the ETV program is administered, whether by the state child welfare agency in collaboration with another state agency or another contracted ETV provider.*
- *Provide to CB an unduplicated count of the number of ETVs awarded each school year (July 1st to June 30th). (Please see Section F2 and Attachment C).*

The Education and Training Voucher program operations are provided on a statewide basis by Baptist Child and Family Services Health and Human Services of San Antonio under a five-year contract (federal fiscal years 2018- 2023). The contractor employs an education and training voucher lead staff and four education and training voucher staff members to administer the program statewide. Two staff specifically provide case management activities, outreach, and marketing services to increase program enrollment, maintain student participation, and promote opportunities and awareness for short-term vocational and technical certification programs to learn a specific skill. In addition, the contractor's primary responsibility is to verify Education and Training Voucher eligibility, collect certain demographic information (e.g., gender, age, and race), track student attendance at institutions of higher education, process applications, and issue voucher payments. Policies, processes, and forms are continually fine-tuned with the contractor and solutions for improvements are discussed. The program continues to receive regular feedback from the Texas Statewide Youth Leadership Council, Education and Training Voucher participants, DFPS staff, providers, partners, and other public and private organizations. DFPS Transitional Living Services and Legal staff submit questions to the ACF to obtain additional guidance on the Education and Training Voucher program.

The Education and Training Voucher program contractor provides information to students and providers on the program through their website (<http://discoverbcfs.net/texasetv>). A chat feature was added to the website in fiscal year 2019. The Education and Training Voucher Facebook page (<https://www.facebook.com/texasetv>) provides reminders, updates, and other pertinent information. The contractor offers both paper and electronic versions of the Education and Training Voucher application on this website which further streamlines services for applicants. The website also has links to the [College for All Texans](#) website, sponsored by the Texas Higher Education Coordinating Board which offers information about paying for college, finding the right college, and college costs. The Texas Higher Education Coordinating Board added a dependent or ward of the court designation on the Apply Texas application to assist schools with outreach and support efforts. This common application is used by students to apply to Texas higher education institutions and is currently available to applicants.

The contractor maintains and updates a toll-free number (877-268-4063) to provide information and answer questions about the Education and Training Voucher program. The Education and Training Voucher website included information on human trafficking resources and assistance.

#### **Report on the State's Specific Accomplishments Achieved Since the 2020-2024 CFSP Submission.**

The Education and Training Voucher program contractor provided case management activities, outreach, and marketing services for the Education and Training Voucher program to increase program enrollment, maintain student participation, and promote opportunities and awareness for short-term vocational and technical certification programs to learn a specific skill. Education and Training Voucher program contract deliverables include:

- Increase awareness of the Education and Training Voucher program statewide through outreach, marketing, and training;
- Promote opportunities and awareness to eligible students and others about vocational and technical schools and certification programs;
- Explore efforts to retain existing and recruit new Education and Training Voucher participants;
- Explore options with students on expediting the Education and Training Voucher application process by allowing education and training voucher coordinators access student enrollment records;
- Explore common trends and barriers to students not completing or fully utilizing the Education and Training Voucher program;
- Report on outreach, market, and training activities including efforts to increase contacts;
- Track an increase in the number of new Education and Training Voucher participants associated with the expectations of the contract and
- Request applications be reviewed and approved if appropriate (e.g., meet program criteria and attend school), if submitted after the deadline period.

DFPS continued promote opportunities and raise awareness to vocational and technical

training opportunities available through community colleges where the college tuition waiver may be utilized, since these can lead to more employment opportunities in a shorter time frame.

In addition to assisting and supporting participants with two- or four-year degree plans, the education and training voucher specialists promoted vocational and technical programs to current and former foster care students and others as another post-secondary education option. This included:

- Researching and visiting colleges, universities, etc., to determine the types of vocational and technical training program opportunities available;
- Informing students and other interested parties on how to locate and enroll in these programs;
- Providing the schools program contact information to interested parties;
- Posting training programs available by school and region on the Education and Training Voucher webpage;
- Developing or using existing material related to vocational and technical skills training programs;
- Informing youth about entities listed in outreach, market, and training, as well as vocational and technical school opportunities either individually or at conferences and events;
- Creating a separate section on the Baptist Child and Family Services Health and Human Services of San Antonio ETV webpage with marketing materials; and
- Other activities associated with promoting vocational and technical opportunities.

The education and training voucher specialists and coordinators provided support services as needed to students to maintain existing participation. The specialists reviewed student files each semester to identify students at risk of dropping out or losing federal financial assistance and/or Education and Training Voucher funds, mitigate incomplete applications, identify students with grade point averages below 2.5, and assist in situations where a student may need assistance to stay in school or need a new evaluation of their educational goals. The education and training voucher specialists and coordinator may also contact students and provide referrals or information about the appropriate school, community support services, or school resources a student may need.

When necessary, programmatic and policy updates were provided at the statewide Preparation for Adult Living staff meetings throughout the year and Chafee or state-funded college and teen conferences, as well as other events, such as at the Education Reach for Texas conferences where youth, young adults, DFPS staff, providers, community partners, and institutions of higher education are in attendance

Since 2016, a post-secondary education committee has been led or attended by the Transitional Living Services team lead staff and a University of Texas at Austin staff person with the assistance of the Children's Commission, stakeholders, and staff. The committee addressed foster youth and young adults as they achieve higher education goals, as part of recommendations identified in the Children's Commission *Texas Blueprint* report. This committee distributed the *Texas Higher Education Foster Care Liaisons Information and Resource Guide* to schools and stakeholders. A post-secondary

education committee workgroup created this resource for youth and young adults and foster care liaisons. Workgroup members contributed information about known services, gaps, solutions, and recommendations, as well as developed a webinar series to assist foster care liaisons, school counselors and other advocates in educating current and former foster youth about the benefits, services and resources available to them. In 2023, this workgroup is creating resources for caregivers to assist youth and young adults with their pursuit of post-secondary education. DFPS posted information about the Career Development and Education program on the DFPS website the Transitional Living Services webpage, since the workgroup identified a need for one central location of the many states career and education resources.

DFPS continues to work with the Texas Education Agency, and the Texas Higher Education Coordinating Board to refine and streamline program operations, practices and policies and promote the Education and Training Voucher program. Currently, when a former foster care student completes the Free Application for Federal Assistance, the student is directed to the lead state independent living coordinator to verify eligibility (e.g., the student was in foster care at the age 130 to qualify for federal student aid and determine other CPS benefits available to the student such as the Education and Training Voucher and Tuition Fee Waiver benefits. DFPS staff and providers regularly encourage youth and young adults to explore available opportunities aligned with their education goals through career and technical classes or schools providing opportunities to learn a skill and receive a certification in a shorter period of time than a two- or four-year degree DFPS reports Education and Training Voucher services provided to youth and young adults to the National Youth in Transition Database each reporting period. Service data is reviewed for continuous quality program improvement.

The Education and Training Voucher program serves youth who were in out-of-state foster care and moved to Texas to attend school, when funding is available. Students who move to Texas and were previously receiving funds from another state will need to continue to receive funds from that state. Out-of-state students are provided contact information for their home state's independent living coordinator if they were previously receiving funds in that state to inquire about continuing in the Education and Training Voucher program in their state of origin.

Education and Training Voucher funds are not used to pay for any living costs of youth age 16 to 17 who are in DFPS conservatorship and living with a parent or guardian or if they are young adults enrolled in the Extended Foster Care or Supervised Independent Living programs. If a student over age 18 is living with a parent and attending school, a rental agreement between the parent and student is strongly recommended with each party agreeing to pay their share of living expenses, such as rent and utilities. The student receives the funds and is responsible for paying the parent the expenses agreed to in a rental agreement. In addition to the contractor monitoring how funds are spent, this payment method also teaches the student about financial management and responsibility. The Education and Training Voucher program website has information to assist staff and victims of human trafficking on how to receive assistance. Additionally, the home page was revised to promote and encourage students to explore vocational and technical

schools for skills trainings and certifications.

**Describe the methods the state will use to: (1) ensure that the total amount of educational assistance to a youth under this and any other federal assistance program does not exceed the total cost of attendance (as defined in section 472 of the Higher Education Act of 1965); and (2) to avoid duplication of benefits under this and any other federal or federally assisted benefit program. (See sections 477(b) (3) (J) and (i) (5) of the Act, and Attachment C of this PI.)**

The Education and Training Voucher program contractor ensures educational assistance to students who have applied for the Education and Training Voucher program and other federal financial assistance do not exceed the total cost of attendance. A student must submit a budget worksheet, along with the school's financial aid award letter, notification or payment voucher which indicates the amounts and sources of any federal or state financial aid the student is receiving for the academic year. All eligible students are required to submit a Free Application for Federal Assistance to determine the federal student aid program to which the student may be eligible. Students must submit a renewal Free Application for Federal Assistance each year they enroll in school. DFPS worked with the contractor to implement a direct deposit requirement in fiscal year 2021.

In Texas, the state college tuition and fee waiver are factored into the costs of attendance. The Education and Training Voucher staff uses this information to calculate the amount of Education and Training Voucher funds the student is eligible for each academic or school program year. If the student's cost of attendance, as set out by the higher education institution, is fully covered through other funding sources Education and Training Voucher funds cannot be awarded. In these cases, students are advised to visit the financial aid office to inquire about a cost of attendance adjustment if there is proof class costs cannot be met with existing funds. For example, a required specialized software program is needed for a class. If approved, the student can resubmit a revised financial aid letter and budget sheet with a request to have Education and Training Voucher funds pay for these additional costs, if funds are available to the student.

For fiscal years 2021 and 2022, enrollment and new applications in the Education and Training Voucher program decreased. Some of this decrease can be attributed to the pandemic; however, the contractor has identified other enrollment issues that may be contributing factors, including:

- Not meeting the school policies for satisfactory academic progress with a drop in the grade point average affecting continued financial aid eligibility;
- Exceeding the cost of attendance for students applying for loans and then applying for Education and Training Voucher funds without understanding the impact;
- Not accessing all funding available even when reminders are sent from staff;
- Not sending all documents to complete the application process despite follow up from the staff;
- Lack of awareness of the program, as contractor surveys indicate.

The Education and Training Voucher program contractor continued to prioritize improving services in federal fiscal years 2021 and 2022 as follows:

- More social presence with user-friendly updates to the Education and Training Voucher website and the addition of an Education and Training Voucher Facebook page;
- More flexibility with application deadlines and quicker processing times;
- Monthly follow up to pending applications to enroll youth sooner in the program;
- Increased outreach and communication with youth, staff, and the community;
- Partnerships with transition centers and DFPS Preparation for Adult Living staff and foster care liaisons to host Education and Training Voucher days;
- Implementation of mass email reminders for application open dates, deadlines, documents needed, etc., to both youth and staff;
- Implementation of a new chat feature on the Education and Training Voucher website; and
- Implementation of texting for follow up purposes with youth.

The Education and Training Voucher program contractor will continue outreach to these students to discuss the effects of loans and receiving the voucher, refer underperforming to tutoring and mentoring resources available at college offices, and notify students about the need to access remaining fund balances and submit the missing documents to complete the application.

The Education and Training Voucher program contractor will continue to advise all students not receiving the full, allowed fund amount to have discussion with the financial aid office on a cost of attendance adjustment so the student can benefit from the full amount. Information adjustment requests is posted on the website. In the Extended Foster Care and Supervised Independent Living programs where student's housing or room and board expenses are paid for from these programs, the contractor ensures Education and Training Voucher funds are not duplicating these same expenses. The Education and Training Voucher eligibility form requires the Preparation for Adult Living staff to indicate if a student is in the Extended Foster Care program or if the student is living with a parent. The Education and Training Voucher eligibility form was revised in fiscal year 2020 to include youth up to age 23, removing the age 21 enrollment limit. The form was updated again in 2021 to include youth up to age 25 and updated again in September 2022 to revert back to the eligibility age of 23 years.

**Collaborations with Tribes (section 477 (b) (3) (G), Social Security Act.**

Preparation for Adult Living staff provide each of the three federally recognized Tribes located in Texas with updated information about eligibility for benefits and services of the Preparation for Adult Living and the Education and Training Voucher programs as needed and upon request, including the Education and Training Voucher program online application process at ([www.texasetv.com](http://www.texasetv.com)). The Preparation for Adult Living staff are available to provide training to Tribal staff on Chafee Foster Care Independent program benefits. The contractor will assist Tribal representatives and youth in applying for the Education and Training Voucher program. Contact information is available on the program website or from the Preparation for Adult Living staff. Preparation for Adult Living staff, CPPS regional directors, or the CPS tribal liaison consult annually and upon request with the Tribes.

Consultations include Tribal member name, location, contact dates, and information discussed, including child-specific cases, if necessary. As of April 2023, no tribal youth have applied to the Education and Training Voucher program.

**Report on the state's postsecondary specific accomplishments achieved since the 2020-2024 CFSP submission.**

The contractor provides case management activities, outreach, and marketing services for the Education and Training Voucher program to increase enrollment in the program, maintain student participation, and promote opportunities and awareness of short-term vocational and technical certification programs to learn a specific skill. In fiscal year 2020, DFPS implemented a direct deposit requirement, which has streamline payments to youth and young adults and alleviates risks of fraud.

DFPS implemented the federal Supporting Youth and Families through the Pandemic Act increase in the eligibility age up to age 27 for Education and Training Voucher services through September 2021. In addition to age eligibility, the relief bill also raises the Education and Training Voucher maximum yearly benefit amount from \$5,000 to \$12,000 until September 30, 2022. From September 2021 through September 2022, young adults up until their 25th birthday received up to \$12,000 for cost of attendance as the availability of the additional HR133 Education and Training Voucher federal funds remained. After September 2022, the eligibility age reverted back to 23 and the maximum yearly benefit amount to \$5,000.

DFPS staff and providers regularly encourage youth and young adults to explore available opportunities aligned with their education goals through career and technical classes or schools providing opportunities to learn a skill and receive a certification in a shorter period of time than a two- or four-year degree.

The Preparation for Adult Living staff are available to provide training to Tribal staff to better inform Tribal youth about Chafee Foster Care Independent program benefits. The contractor is available to meet with Tribal representatives and youth to assist in applying for the Education and Training Voucher program. Contact information is available on the program's website or from the Preparation for Adult Living staff.

## Education and Training Vouchers Texas

Time Period	Number of Education and Training Vouchers Awarded	Number of New Education and Training Vouchers Awarded
<b>2022-2023 School Year*</b> (July 1, 2022, to June 30, 2023)	*415 (*estimate)	*220 (*estimate)
Time Period	Number of Education and Training Vouchers Awarded	Number of New Education and Training Vouchers Awarded
<u>Final Number:</u> <b>2021-2022 School Year</b> (July 1, 2021, to June 30, 2022)	407	123

The methodology used to gather and report data includes the following: The service contract with Education and Training Voucher program provider outlines how database requirements, methodology, and performance monitoring of the contractor's accounting practices, records, and data system functions. The contractor assigns a unique number to each youth entered in their database. Each youth's personal information is entered into their system which notifies the contractor of duplicate information. The contractor is able to provide the number of youths awarded vouchers during certain time periods based on information this data.

The delivery of the Chafee Preparation for Adult Living and Education and Training Voucher services helped DFPS to achieve the strategies and objectives outlined in Sections 2.4 e, f and 2.4 g.

### **Planned and Actual Use of Additional Chafee/ETV Funding**

DFPS was awarded \$25.3 million in supplemental Chafee funding, as well as \$3.7 million in additional Education and Training Voucher funding. This is a new, time-limited supplemental Chafee program funding, was intended to be used during the pandemic to aid, protect, and support youth and young adults currently or formerly in foster care as they transition to adulthood. While the grant was available from October 1, 2020, to September 30, 2022, there are certain funding flexibilities allowed through September 30, 2021.

DFPS allocated the additional Chafee funding for the following purposes:

- \$11.25 million was awarded to two youth serving organizations to allocate funds directly to youth and young adults ages 21 to 27 who transitioned out of foster care, as well as help with allowable transportation costs for young adults age 18 to 27;
- \$3.3 million supported the expansion of Preparation for Adult Living transition support

services and aftercare contracts with funding used to assist youth up to age 21 who are no longer a part of the extended foster care program;

- \$8.5 million was distributed to youth in foster care and young adults in extended foster care to support transitional costs;
- \$257,710 funded a developmental/experiential youth camp for Preparation for Adult Living during fiscal year 2022;
- \$171,114 funded an employment readiness and job training program for eligible young adults attending Texas State University with other post-secondary partners willing to replicate this program currently being sought; and
- \$98,088 funded job training and job coaching programs for eligible youth in El Paso and Waco which offered Goodwill's resume writing and interviewing class, individual assistance, and job coaching, as well as teachable moment assistance related to navigating work and school.

The Education and Training Voucher supplemental funding was available from October 1, 2020, to September 30, 2022; however, certain flexibilities offered under this grant expired on September 30, 2021. DFPS amended the existing Education and Training Voucher contract with the Education and Training Voucher program contractor to add in the supplemental funds for distribution to eligible youth and young adults.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section VIII. Consultation and Coordination Between States & Tribes**

**Texas Department of Family and Protective Services  
ACYF-CB-PI-23-01**

# 2024 Title IV–B Annual Progress and Services Report

## VIII. Consultation and Coordination between Tribes and States

- *Describe the process used to gather input from tribes since the submission of the 2023 APSR, including the steps taken by the state to reach out to all federally recognized tribes in the state. Provide specific information on the name of tribes and tribal representatives with whom the state has consulted. Please provide information on the outcomes or results of these consultations. States may meet with tribes as a group or individually.*
- *Provide a description of the state’s plan for ongoing coordination and collaboration with tribes in the implementation and assessment of the CFSP/APSR. Describe any barriers to this coordination and the state’s plans to address these barriers.*
- *Provide an update, since the submission of the 2023 APSR, on the arrangements made with tribes as to who is responsible for providing the child welfare services and protections for tribal children, whether the children are under state or tribal jurisdiction. These services and protections include operation of a case review system for children in foster care; a preplacement preventive services program for children at risk of entering foster care to remain safely with their families; and a service program for children in foster care to facilitate reunification with their families, when safe and appropriate, or to place a child in an adoptive home, legal guardianship, or other planned, permanent living arrangement subject to additional requirements.*
- *Provide a description, developed after consultation with tribes, of the specific measures taken by the state to comply with Indian Child Welfare Act (ICWA).*
- *Describe the results of the state’s consultation with each Indian tribe in the state as it relates to determining eligibility for Chafee/Education and Training Voucher (ETV) benefits and services and ensuring fair and equitable treatment for Indian youth in care. Specifically:*
  - ▶ *Describe how each Indian tribe in the state has been consulted about the programs to be carried out under the Chafee program.*
  - ▶ *Describe the efforts to coordinate the programs with such tribes*
  - ▶ *Discuss how the state ensures that benefits and services under the programs are made available to Indian children in the state on the same basis as to other children in the state.*
  - ▶ *Report the Chafee benefits and services currently available and provided for Indian children and youth.*
  - ▶ *Report on whether any tribe requested to develop an agreement to administer, supervise, or oversee the Chafee or an ETV program with respect to eligible Indian children and to receive an appropriate portion of the state’s allotment for such administration or supervision. Describe the outcome of that negotiation and provide an explanation if the state and tribe were unable to come to an agreement*
- *State agencies and tribes must also exchange copies of their APSRs Describe how the state will meet this requirement for the 2024 APSRs.*

**Response to the five major components of the Indian Child Welfare Act:**

1. Identification of children subject to Indian Child Welfare Act (ICWA) by the state child welfare services agency.
2. Notification of parents subject to ICWA and Tribes of State proceedings involving Indigenous children and their right to intervene.
3. Placement preferences of children subject to ICWA in foster care and pre-adoptive and adoptive homes.
4. Active efforts to prevent the breakup of families subject to ICWA when parties seek to place a child in foster care or for adoption.
5. Tribal right to intervene in state proceedings or transfer proceedings to the jurisdiction of the Tribe.

Formal liaison relationships are used for ongoing coordination and collaboration with the Tribes. This formal process is utilized for the assessment, monitoring, and improvement of Texas' compliance with the ICWA. The formal liaison process with specified Department of Family and Protective Services (DFPS) Child Protective Services (CPS) staff exists in the regions where the three tribes are located: the Alabama- Coushatta Tribe of Texas in DFPS Region 05; the Kickapoo Traditional Tribe of Texas in Region 08; and the Ysleta del Sur Pueblo/Tigua Tribe in Region 10. There is a discussion regarding barriers to coordination and collaboration with the three federally recognized tribes at annual state/tribal meetings and the regional tribe specific meetings. A state/tribal format and its frequency, agreed upon at a joint meeting in August 2019 provides the Tribes, state office leadership, regional leadership, and the liaisons with the venue to discuss issues that may arise. In addition to the ongoing meetings, the state office liaison is responsible for identifying potential barriers and working with the regional liaisons, regional leadership, and the Tribes to come to a resolution. Participants include the Tribes, DFPS, and other interested stakeholders. Challenges related to the COVID-19 pandemic and its unintentional consequences has impacted work at the regional level and coordination with the tribes.

DFPS and the Tribes have agreed to meet locally and at the state level. A statewide meeting would be held between DFPS state representatives and each Tribe once per quarter, resulting in each Tribe having a dedicated meeting. Annually, all three Tribes and DFPS state representatives would meet. Additional meetings or conference calls could be held as needed to ensure compliance with the ICWA and enhance collaboration.

Due to continued ongoing challenges related to COVID-19, the state/tribal meetings have been held virtually. In-person meetings will be held when mutually agreed upon by the state and the Tribes. The state/tribal meeting includes state office leadership including DFPS Legal and the DFPS ICWA liaison, the Child Protective Investigations (CPI) and CPS directors of field and regional directors, as well as ACF representatives, a Court Appointed Special Advocate (CASA) representative, a Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (Children's Commission) representative, and representatives from all three federally recognized tribes. The meetings focus on knowledge building related to DFPS programs and strategic planning for ongoing collaboration between DFPS and the Tribes. The goal is to

encourage joint strategic effort by DFPS and Tribal representatives to improve safety, permanency, and well-being for Indigenous children and their families through the Texas child welfare system.

In January 2021, DFPS partnered with the Children's Commission to host the Texas Indian Child Welfare Act Summit. This one-day conference provided several hours of continuing education to strengthen ICWA knowledge and understanding among caseworkers, CASAs, attorneys, and judges. Summit discussions have been delayed due to the expected United States Supreme Court decision in *Brackeen v. Haaland* regarding the U.S. 5th Circuit Court of Appeals ruling which invalidated portions of the ICWA as unconstitutional. DFPS will continue to collaborate with the Tribes and various community stakeholders to assess the benefits of another ICWA Summit.

Restrictions related to COVID-19 and turnover of key staff in both the Tribes and DFPS resulted in planned in-person meetings being further delayed. Throughout fiscal year 2022, attempts to schedule virtual meetings with the Tribes and the Children's Commission were initially not fruitful due to changes in key staff for both DFPS and the Tribes; however, in March 2022, DFPS began hosting a virtual ICWA monthly meeting, including DFPS disproportionality managers. Any monthly meetings where this did not occur were at the request of either the attending Tribes and/or DFPS. Monthly virtual meetings are scheduled to continue through fiscal year 2023. Discussions include, but are not limited to, updates learned during the National Indian Child Welfare calls, identified areas to improve child welfare policies and practices, and other resources beneficial for improving positive permanency outcomes for Native American children.

During the monthly virtual meeting, each Tribe is surveyed regarding availability to host or attend in-person meetings. DFPS informed the Tribes of its fiscal year 2023 goal to conduct an in-person visit with each Tribe individually and host an in-person meeting with all three Tribes in attendance.

In fiscal year 2022, the DFPS ICWA liaison visited the Ysleta Del Sur Pueblo/Tigua Tribe. In-person visits were scheduled in January 2023 and April 2023 with the Alabama-Coushatta Tribe of Texas; however, due to COVID-19 and other tribal schedule conflicts are still preventing this from occurring to date.

DFPS enters and operates in conjunction with the three Native American Tribes in Texas by means of either an intergovernmental agreement or memorandum of understanding (both are further referred to as "Agreements" throughout this document). In fiscal year 2022, the Agreement between Ysleta Del Sur Pueblo/ Tigua Social Services and DFPS was finalized. DFPS and Ysleta Del Sur Pueblo/Tigua representatives continue to meet as needed to resolve issues and maintain a collaborative relationship. Since updating the Agreement, DFPS and Ysleta Del Sur Pueblo/Tigua representatives have collaborated on joint trainings for DFPS staff. DFPS and Tigua representatives continue to collaborate on additional trainings for DFPS staff due to staff turnover. Additional trainings are planned for fiscal years 2023 and 2024.

Discussions continue with the Alabama-Coushatta Tribe of Texas to begin the process of updating its Agreement with DFPS. The 2010 Agreement is currently under review by the Tribe.

The Children's Commission supports partnering with system stakeholders to promote ongoing knowledge and understanding of the ICWA and its importance, as well as partners with DFPS in supporting state/tribal collaborative meetings and collaborates with the National Center for State Courts and the participants of the Texas Court Improvement Project (CIP) ICWA Constituency Group. A representative from the Ysleta Del Sur Pueblo/Tigua Tribe currently serves on the Statewide Collaborative on Trauma-Informed Care at the request of the Children's Commission.

The Children's Commission issued a jurist in residence letter in August 2019, informing readers of the U.S. District Court for the Northern District of Texas opinion in *Brackeen v. Haaland* (formerly *Brackeen v. Zinke*) declaring unconstitutional provisions of ICWA. Most recently, in November 2022, the United States Supreme Court heard oral arguments for the case. The ruling by the United States Supreme Court is expected in Summer 2023. The Child's Commission continues to monitor this case and update stakeholders on the status. This case has underscored the importance of an ongoing dialogue between DFPS and the Tribes. DFPS leadership continues to coordinate with Tribal representatives in an effort to strengthen lines of communication and their willingness to meet at the Tribes request.

The DFPS ICWA liaison also participates in National Indian Child Welfare Act calls with the Child Welfare League of America to enhance DFPS' ability to provide services and collaborate with Tribal partners. These meetings are held virtually each month. DFPS Disproportionality managers have also been included in these meetings.

DFPS effectively ensures compliance with ICWA through established policy and procedures. Current policy provides DFPS employees with detailed ICWA information and DFPS responsibilities under the Act. DFPS policy details specific ICWA child-placing requirements and related guidelines and regulations to ensure compliance in any court action involving a Native American child who is subject to the Act. The policy can be found in CPS Policy Handbook Sections 1225, 5330, 5340, and 5740, and the *Court Related Issues Resource Guide*. An update to the current *ICWA Resource Guide* began in January 2022 and is pending the *Brackeen v. Haaland* ruling.

As part of the Texas Child and Family Services Review process, Item 14 Preserving Connections rates both how well DFPS preserved important connections the child had before coming into foster care and rates whether staff were compliant regarding inquiry into whether a child may be a member of or eligible for membership in a Native American tribe. There is also a follow-up question to see if DFPS provided the Tribe with timely notification of its right to intervene in any state court proceedings seeking an involuntary foster care placement or termination of parental rights. The questions continue to be used in all foster care cases reviewed through structured case review processes.

All new caseworkers are required to attend the CPS and CPI professional development training which includes a computer-based training on the ICWA. Since 2015, new caseworkers also work closely with an assigned mentor. This relationship is designed to promote active learning of essential CPS skills, including consistent interviewing of children, parents, and family members to identify all potential ICWA cases. Agency attorneys present on the ICWA in the live training "Legal Fundamentals for CPS" for new CPS staff and in informal trainings for existing staff. Agency attorneys, disproportionality managers, and permanency staff work collaboratively to review policy updates. Ysleta representatives recently reviewed the fiscal year 2020 computer-based training and provided feedback informed training updates now available to DFPS staff.

The *Texas Practice Guide for CPS Attorneys* available on the DFPS website contains an ICWA-related article and related forms and notices. This guide is intended primarily for the district and county attorneys who represent DFPS in many parts of the state, as well as DFPS regional attorneys. CPS staff may also access these materials for guidance on ICWA requirements. DFPS Legal provides ICWA training to external legal stakeholders by providing presentations at local CASA organizations and attorney ad-litem conferences. DFPS Legal also provides support to county and district attorneys throughout Texas for ICWA cases.

Of the three federally recognized Tribes, none are self-reporting or independent of the DFPS data reporting system. As a result, all reports of abuse and neglect and any resulting investigated cases are entered in IMPACT, the DFPS statewide information system. This information is used to analyze outcomes for Native American children as part of ongoing efforts to address disproportionality, as well as to meet the needs of Native American children in terms of achieving safety, permanency, and well-being. IMPACT began undergoing further development in February 2022 for an Indian child status page which includes tribal membership or eligibility for membership, confirmation of membership, and legal notice to a Tribe. This page went live in October 2022.

DFPS continues to analyze race and ethnicity data to determine trends and inform strategies to best serve children and families. In September 2022, DFPS released *Report for the Fiscal Year 2022 Disproportionality and Disparity Analysis*, as required by the 2022-23 General Appropriations Act, Senate Bill 1, 87th Legislature, Regular Session, 2021 (Article II, DFPS Rider 33). This report analyzes disproportionality and disparities within Harris, Dallas, Tarrant, Bexar, Hidalgo, Travis, and El Paso counties and presents the prevalence of racial and ethnic disproportionately and disparity at DFPS. Rider 33 is located at: [https://www.dfps.texas.gov/About\\_DFPS/Reports\\_and\\_Presentations/Rider\\_Reports/documents/2022/2022-09-30\\_Rider\\_33\\_Report.pdf](https://www.dfps.texas.gov/About_DFPS/Reports_and_Presentations/Rider_Reports/documents/2022/2022-09-30_Rider_33_Report.pdf)

DFPS caseworkers are trained to ask about possible Native American heritage initially, as a case progresses, or when new family members become known. A Native American Child and Family Questionnaire facilitates getting the critical information a Tribe needs to verify a child's status under the ICWA. This information is obtained by asking questions of parents, any child who is old enough to report, and other available relatives. In order to

track which CPS cases are subject to the ICWA, caseworkers must document if any and which family member reports or denies Native American heritage.

In addition, the Texas Family Code, Sections 262.201(f), 263.202(f-1), and 263.306(a-1) (3) require a judge to ask all parties present whether the child or family may have Native American heritage and to identify any Native American tribe at the adversary and status hearings, as well as the permanency hearing before final hearing.

### **Identification of Native American Children by the State Child Welfare Services Agency**

In fiscal year 2022, 28 Native American children were served statewide through Family Preservation Services and 52 Native American children were in DFPS custody at some point during the same time period as indicated by race and ethnicity data recorded in the *DFPS Data Book*. These numbers do not reflect the number of ICWA cases, but rather the number of children listed as Native American by the caseworker. This aspect of data collection requires further ongoing DFPS efforts to refine procedures for improvements in identifying Native American children subject to the ICWA. The CPS professional development training for new caseworkers makes clear all parents, family members and any child old enough to be interviewed must be asked about possible Native American ancestry and family ties, both initially and throughout the life of a case. In the specialty trainings for both investigations and conservatorship workers, ICWA requirements are also reinforced. The *CPS Professional Development Legal Guide* provided to all new employees reiterates this directive to workers:

"The only way to find out whether a child is or may be an Indian child is to ask. Ask any child old enough to be interviewed, ask parents, and ask any relatives who are available to be interviewed. The best practice is to ask every family member whether anyone in the family or their ancestors has a connection to an Indian Tribe. Many times, key facts about a child's Native American heritage may not be available when a case is first investigated. The best practice is to ask about Indian status routinely during the life of a case, especially when new family members are identified."

If there is any information to suggest the child or family has a Tribal affiliation, whether current or in prior generations, the necessary information must be sent to the Tribe for research on the child's status under the ICWA.

DFPS policy also directs staff to work closely with legal counsel in any case where ICWA may apply. DFPS attorneys offer guidance on individual cases to ensure ICWA compliance. DFPS Legal provides training to DFPS regional, legal, and CPS staff and consults with district and county attorneys who represent DFPS in ICWA cases. In addition, the DFPS ICWA liaison consults with staff and provides support as needed.

CPS has incorporated information on family member responses to questions about Native American family history into all standard court reports. Questions about possible Native American family history have been added to agency forms and court reports used by both families and caseworkers including Family Information Form (2626); Child Caregiver

Resource Form (2625); Status Report to Court (2070); and the Permanency Plan and Progress Report to the Court (2088). These forms help raise awareness of the issue and prompt families, agency staff, other parties, and the court to consistently consider whether ICWA may apply in an individual case.

### **Tribal Right to Intervene in State Proceedings, or Transfer Proceedings to the Jurisdiction of the Tribe**

Executed Agreements with both the Ysleta del Sur Pueblo/Tigua Tribe and Alabama-Coushatta Tribe of Texas delineate DFPS procedures in circumstances when CPS receives referrals involving Tribal members. The Agreement with Ysleta del Sur Pueblo/Tigua was originally executed in 2014 and an updated version was finalized in December 2021. When a referral is received involving a child residing on a reservation, DFPS staff notify the Tribe's designated Indian Child Welfare Worker. If the Tribe wants to handle the referral, DFPS provides the Tribe with the information. Although the Alabama-Coushatta Agreement is currently under review by the Tribe, the parties continue to work cooperatively.

### **Notification of Native American parents and Tribes of State Proceedings Involving Native American Children and Their Right to Intervene; Placement Preferences of Native American Children in Foster Care, Pre-Adoptive, and Adoptive Homes; and Active Efforts to Prevent the Breakup of the Native American Family When Parties Seek to Place a Child in Foster Care or for Adoption.**

With the location of the three federally registered Tribes, a formal liaison process with specified CPS staff exists in Region 05 containing Livingston for the Alabama- Coushatta Tribe of Texas; Region 08 containing Eagle Pass for the Kickapoo Traditional Tribe of Texas; and Region 10 containing El Paso for the Ysleta Del Sur Pueblo/Tigua Tribe. In addition, the CPS division administrator for permanency acts as a state level liaison to the three Texas Tribes and Tribe representatives from other states.

DFPS works with the designated Indian Child Welfare Worker employed by each Tribe, to ensure:

- Parents of a Native American child and the Tribe receive proper notification of CPS involvement, and statutory notices required under ICWA are properly served on all appropriate persons and entities.
- Parents and the Tribe participate in the development of a service plan with culturally responsive and effective services to resolve referral issues.
- Active efforts are made to prevent a child's removal consistent with the child's safety.
- If a child must be removed, DFPS staff actively work with Tribal representatives and family members to have the child returned to the family. This includes identifying specific hurdles and impediments to reunification and developing an appropriate service plan as noted above. Ysleta del Sur Pueblo representatives indicated family team meetings occur at the investigative level in approximately 99 percent of their

cases to ensure families receive the services they need and prevent a removal in the future.

Tribal representatives concurred the working relationship between the designated Indian Child Welfare Worker for each Tribe and the DFPS ICWA liaison process was effective and occurring as required. Notification to Tribes located outside Texas is also occurring.

Placement preferences applicable to Native American children are followed unless a court finds good cause not to do so.

DFPS employs active efforts to ensure Native American children and families are provided appropriate services and prevent the breakup of the Native American family. In many cases a Tribe's Indian Child Welfare Worker participates in all casework activities with the CPS worker to assist with language, cultural issues, and Tribal requirements. In addition, DFPS ensures protections are provided to all the families and children served by DFPS, which includes Native American families and children.

DFPS uses family group decision-making practices to work with and engage children, youth, and families in safety and service planning and decision making, including family group conferences, Circles of Support, and family team meetings. The family group decision-making model is used during an investigation to engage the family in safety decision-making to prevent a removal. It is also utilized during Family Based Safety Services and substitute care cases in order to engage the family in developing culturally appropriate service plans for Native American families. These family group decision-making meetings include the Tribal Indian Child Welfare Workers. By working collaboratively with the Indian Child Welfare Worker in the development of the service plan, DFPS is able to access services provided by the Tribes and available to Native American families. DFPS regional staff have also observed the Peacemaker Court established by the Alabama-Coushatta Tribe of Texas. The opportunity for DFPS staff to see how the Tribe resolves child and family issues in a non-adversarial manner has contributed to the ongoing collaboration between DFPS and the Tribe.

Other mechanisms to ensure compliance with the ICWA include verification by DFPS of Tribal members as foster parents, if requested, and ongoing training and resources for both DFPS staff and community partners, including the county and district attorneys who represent DFPS in many areas of the state, CASA, and attorneys ad-litem.

DFPS solicits feedback from the Tribes in attendance at meetings and on conference calls. The Tribes are encouraged to provide feedback during meetings, calls, or through personal contact with DFPS staff. DFPS discusses CPS initiatives and existing CPS programs during the meetings. DFPS will work to provide additional information and updates on the operation of a case review system in collaboration with the Tribes/Tribal children in foster care outside meetings including amendments made to the case review system. The state plan is shared with the Tribal partners to elicit feedback prior to the annual meetings.

The Preparation for Adult Living staff inform and are available to Tribal staff for training and application support for Tribal youth to participate in the Education and Training Voucher program. Tribal representatives, as other stakeholders, are able to access the website at [www.texasetv.com](http://www.texasetv.com). Baptist Child and Family Services, the Education and Training Voucher program contractor, is also available to meet with Tribal representatives and youth to assist in applying for the Education and Training Voucher program. Contact information is available on the program's website or from the Preparation for Adult Living staff. The consultation with the Tribes addresses the procedure for obtaining the credit reports for Tribal children ages 16 years and older in foster care. A process to develop the best method to disseminate this information on an ongoing basis to Tribal partners will be discussed in the upcoming fiscal year.

The Tribes have expressed no concerns about accessing the Preparation for Adult Living and the Education and Training Voucher programs nor behavioral health and medical resources. However, the Tribes have identified needs for increased participation in DFPS trainings available in-person or online, as well as partnerships for recruiting homes.

**Provide Information Regarding Consultations with Indian Tribes in the State Specifically as It Relates to Determining Eligibility for Benefits and Services and Ensuring Fair and Equitable treatment for Indian Youth Under the Chafee Foster Care Independence Act (Section 477(b)(3)(G) of the Act)**

Texas does not currently have Title IV-E state/tribal agreements with any of the three federally recognized Tribes in Texas. A Title IV-E agreement with the Alabama-Coushatta Tribe expired in 2016 and to date has not been renewed by the parties. DFPS is willing to discuss Title IV-E state/tribal agreements with all three Tribes. In January 2023, Ysleta del Sur Pueblo/Tigua Tribe informed DFPS and the Children's Commission that they would be pursuing Title IV-E eligibility. Preparation for Adult Living or other DFPS staff conduct annual face-to-face meetings with the Tribes to discuss the provision of transitional living services to eligible Native American youth.

Preparation for Adult Living staff continue to provide each Tribe with updated information about eligibility for benefits and services of the Preparation for Adult Living/Chafee and the Education and Training Voucher program, as needed and upon request. DFPS added a strategic action step to ensure concerted efforts are made by the Education and Training Voucher contractor to outreach and provide information regarding the Education and Training Voucher program to the Tribes on an annual basis and upon request. Through a contract addendum and renewal, the Education and Training Voucher program contractor began outreaching, marketing, and training various entities to include Tribal representatives about the program. Promoting vocational/technical school opportunities as an alternative to traditional two- and four-year degree plans, and recruitment of new participants is a focus of the Education and Training Voucher program. These activities and meetings are coordinated with the Preparation for Adult Living staff. On an annual basis and upon request, CPS Transitional Living Services staff present updates on Chafee benefits to the three Tribes in Texas and seek their consultation regarding the

adequacy of services provided to Tribal youth.

Regions 05, 08, and 10 federally recognized Tribe participation includes: an Alabama Coushatta Tribe youth in care who participated in Transitional Living Services with Preparation for Adult Living and Chafee Funding benefits; the Kickapoo Tribe had no referrals during fiscal year 2022; and the Tigua Tribe has no Preparation for Adult Living -aged youth who were tribal members.

**State Agencies and Tribes must also Exchange Copies of Their CFSP and APSR. Describe How the State is Meeting This Requirement**

DFPS posted the completed Annual Progress and Services Report and Child and Family Service Plan on its public website. Also, a copy of the annual plan is provided to the Tribes each year. The 2022 plan was shared via e-mail in January 2023.

Throughout fiscal year 2023, DFPS has continued to collaborate with each Tribe to meet any needs identified for improving the policies and practices related to Native American child welfare. For example, when the need for joint-agency training of the Ysleta Del Sur/Pueblo Tribe was identified, DFPS coordinated with the Region 10 regional director, who assisted with ensuring DFPS staff completed the needed training. To ensure the voice of the Tribes are represented throughout policies and practices, DFPS and Tribal staff are jointly working on a needed update of the *ICWA Resource Guide*.

DFPS continues efforts to resume in-person meetings with each of the Tribes throughout fiscal year 2023. When in-person meetings have not been possible, DFPS will continue to host monthly virtual meetings with the Tribes. These monthly meetings continue to include DFPS leadership staff from CPI, CPS, and Disproportionality. In addition, DFPS continues to collaborate with the Tribes and various community stakeholders to assess the benefits of another ICWA Summit.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section IX. CAPTA**

- A. Descriptions, Accomplishments and Proposal of Projects/Initiatives Using CAPTA Funds**
- B. Texas Citizen Review Teams – Annual Report**
- C. Neonatal Update (Fetal Alcohol Spectrum Disorder) Update**
- D. American Rescue Plan Act Funding**

**Texas Department of Family and Protective Services**  
**ACYF-CB-PI-23-01**

## **IX. 2024 CAPTA State Plan**

### **CAPTA Coordinator**

#### **The name, address, and fax number of the applicant agency.**

Texas Department of Family and Protective Services 4900 N. Lamar Blvd.  
Austin, TX 78751  
Telephone (512) 929-6900  
Fax: (512) 339-5927

#### **The name, title, and telephone number of the individual designated to serve as the Child Abuse and Neglect State Liaison Officer with the National Center on Child Abuse and Neglect (NCCAN).**

Liz Kromrei, LCSW  
Director of Services, Child Protective Services Texas Department of Family and Protective Services  
P. O. Box 149030, Mail Code W-157 Austin, TX 78714-9030  
(512) 289-7816

#### **The name and telephone number of a contact person who will be able to answer questions about the application.**

Liz Kromrei, LCSW  
Director of Services, Child Protective Services Texas Department of Family and Protective Services  
P. O. Box 149030, Mail Code W-157 Austin, TX 78714-9030  
(512) 289-7816

#### **The applicant agency's Employer Identification Number (EIN).**

The EIN of the applicant, Texas Department of Family and Protective Services, is 74-2639167.

## **2024 Title IV–B Annual Progress and Services Report**

### **IX. CAPTA**

#### **A. Descriptions, Accomplishments and Proposal of Projects/Initiatives Using CAPTA Funds (Descriptions)**

Listed below are the descriptions of FY 2023 projects/initiatives that were selected from the 14 areas delineated in section 106(a)(1) through (14) of CAPTA.

##### **1) Evaluation of CPS Best Practice Initiatives**

**The Evaluation of CPS Reform Best Practice Initiatives responds to priorities (1), (4), and (7) in the Child Abuse Prevention and Treatment Act Amendments.**

Evaluation efforts are conducted by the Texas Department of Family and Protective Services (DFPS) Analytics and Evaluation team imbedded in the Office of Data and Systems Improvement. The Analytics and Evaluation team is qualified to support the agency through data driven analysis. The team supports the Texas child welfare system in achieving safety, permanency and well-being for children and families by providing strategic analysis and guidance on operations, policies, processes, and initiatives. The Analytics and Evaluation Team supports this work by:

- Providing strategic analysis and guidance for child welfare assessments, models and quality assurance instruments, and process to drive policy and practice;
- Evaluating the effectiveness of major program initiatives and significant programmatic changes; and
- Conducting data analyses to better understand how the child welfare system is operating and impacting outcomes for children and families.

##### **2) Disproportionality Efforts**

**The Disproportionality Program responds to priorities (3) and (11) of the Child Abuse Prevention and Treatment Act amendments.**

The 79th Texas Legislature mandated DFPS examine and address racial disproportionality in the Texas child welfare system, and if found, develop a remediation plan to ameliorate disparities. Since 2005, DFPS has actively worked to eliminate disproportionality and disparities in the child welfare system.

With CAPTA funding for a CPS disproportionality manager, disproportionality work continues to focus on efforts at the regional and state levels. Disproportionality efforts utilize the Texas Model for Eliminating Disproportionality and Disparities as the foundation. The Texas Model includes data collection, leadership development, cultural competence, and community engagement as its key elements. Disproportionality efforts

focus on connecting with local communities using a Community Engagement Model. This approach includes information sharing activities with youth, parents, stakeholders and community partners; cultural humility training sharing data; and involving community in a collaborative process of transforming how DFPS serves and supports families and children. Other community engagement efforts include providing information to and receiving information from communities and engaging in community partnerships.

As of fiscal year 2023, the DFPS Office for Addressing Disproportionality and Disparities (OADD) continues to implement an approach to addressing practices or behaviors that may contribute to disproportionate and disparate outcomes for children and families involved in the Texas child welfare system. The Office reviews current curriculum for relevancy and accuracy. OADD staff continues to broaden the scope, travel to more communities, and engage with alumni youth, parents, and stakeholders to gain real-time feedback to help shape the work. There is an emphasis on prevention by focusing on addressing the factors seen contributing to disproportionality with hopes to connect families to services and programs quickly. The prevention efforts should help mitigate those tertiary risks associated with families with active child protection cases.

### **3) Children with Disabilities**

**The Children with Disabilities Project responds to priorities (7), (9) and (13) of the Child Abuse Prevention and Treatment Act Amendments.**

Services to children with intellectual and developmental disabilities and special health care needs are provided through a collaborative effort of specialized CPS staff in coordination with the child's primary caseworker. Depending on the needs of the child, the specialized staff may include specialized placement team members; developmental disability, well-being, education specialists; and nurse consultants. The focus of the Children with Disabilities Project is to ensure the needs of children with intellectual and developmental disabilities and special health care needs in DFPS conservatorship are met, including placement in the least restrictive setting available that can meet these children's needs; access to comprehensive, coordinated healthcare and services; and access to appropriate educational services, including transition services for children moving from secondary school to post-secondary school activities.

Developmental disability specialists serve as subject matter experts regarding children with intellectual and developmental disabilities, as well as consultants to CPS staff members for securing available services for these children, such as through Medicaid waiver programs. Developmental disability specialists assist the CPS caseworker in obtaining a Determination of Intellectual Disabilities necessary for obtaining certain Medicaid waiver services. They facilitate referrals of appropriate youth aging-out of DFPS conservatorship to the Texas Health and Human Services Commission (HHSC) Office of Guardianship. Developmental disability specialists provide training to CPS staff, community-based care regional staff, and caregivers regarding issues affecting children with intellectual and developmental disabilities. Providing caregivers and caseworkers with knowledge and resources to address the needs of these children enables them to identify appropriate resources, provide better care and advocate for needed services.

For some children with special needs, the developmental disability specialist may assist with placement options. Developmental disability specialists help to negotiate placements in the following targeted institutions, as defined by Texas Government Code, Section 531.151:

- Licensed general residential operations for children with intellectual disabilities;
- Intermediate Care Facilities for Individuals with Intellectual Disabilities and/or Related Conditions;
- Home and Community-Based Services Homes; and
- Nursing facilities; and State Supported Living Centers.

If one of the above-listed facilities accepts a child under 18 years old, additional placement approval is required by DFPS State Office to ensure the placement is the least restrictive option. The developmental disability specialist then facilitates placement of the child with the approved facility within or close to the child's community, if possible. The developmental disability specialist assumes the role of secondary caseworker while the child resides in the facility and completes the bi-annual permanency-planning instrument to determine if the facility placement continues to be the most appropriate placement. When appropriate, the developmental disability specialist continues to search for a less restrictive setting in the community for the child. When such an option is secured, the developmental disability specialist assists the CPS caseworker and the child in transition to the community placement.

A developmental disabilities specialist is housed in the DFPS State Office Placement division. This position provides liaison functions for collaboration and coordination between regional specialized staff, placement staff, caseworkers and supervisors, provider agencies, advocacy groups, stakeholders, and other state agencies and programs. Through coordination of these efforts by specialized staff, the unique needs of children with disabilities and special health care needs are met.

#### **4) Education Project**

**The Education Project responded to priorities (3), (7), (9a and b), and (13) of the Child Abuse Prevention and Treatment Act Amendments.**

Educational outcomes of Texas foster youth mirror national studies. According to data collected by the Texas Education Agency Public Education Information Management System (PEIMS), children in foster care were less likely to leave school due to graduation and more likely to leave because they dropped out in comparison to the general student population. Texas foster youth had lower high school achievement, were more likely to be in special education, and were less likely to be in the gifted and talented program. There remain significant achievable improvements in this area. The Education Project provides policy, protocol, collaboration, and technical assistance leadership for DFPS.

The Education Project funds a CPS education specialist at the DFPS State Office, and each region has a regional education specialist now that the project also funds a program

specialist in a region that previously shared one. The Education Project is designed to improve educational outcomes to children and youth involved in the Texas child welfare system, particularly for children and youth who are in DFPS conservatorship. The education specialists expanded their roles to include follow-up regarding use of education portfolios and building community collaborations that support children in foster care.

#### **5) Texas Council of Child Welfare Boards**

**The Texas Council of Child Welfare Boards responds to priority (11) in the Child Abuse Prevention and Treatment Act amendments.**

The Texas Council of Child Welfare Boards (the Council) is a forum developed to coordinate community services and resources for the protection of children. This initiative encourages the development of local, regional, and statewide child welfare board organizations to promote public and private partnerships and directly ensure proper care and services to foster children and their families, as well as raise awareness of child abuse and neglect issues and tools for its prevention.

The Council has been effective in providing leadership through a comprehensive, cohesive network of local and regional child welfare boards. The county and regional boards are, in turn, able to support local services to vulnerable children and promote community child abuse and neglect prevention efforts. Local child welfare boards have historically been a major factor in the support of caregivers, foster children, and their families. The Council is committed to supporting local boards in their efforts through training, advocacy, policy guidance, assistance with local funding initiatives, statewide information distribution and networking, and child abuse and neglect prevention activities. Much of this mission is accomplished through their website and the network of state, regional, and local volunteers.

The Council is the strategic umbrella for all the Regional Councils of Child Welfare Boards throughout Texas. The Council provides the leadership and continuity of support of children's services in Texas.

#### **6) Parent Collaboration Group**

**The Parent Collaboration Group responds to priority (3) in the Child Abuse Prevention and Treatment Act Amendments.**

The statewide Parent Collaboration Group Advisory Committee model involves biological parents who have received DFPS services in the design, implementation, and evaluation of DFPS programs, policies, and services. Through this initiative, parents are engaged in its improvement through sharing their lived experience and providing their unique and valuable perspective regarding work with families and children.

The mission of the statewide Parent Collaboration Group Advisory Committee is to provide:

- Parent input to DFPS regarding policy development;
- Recommendations to DFPS regarding how services may be improved for children and families;
- Training opportunities to workers regarding the parent perspective; and
- Support to parents and function by linking parents and DFPS in partnerships.

The goals of the committee include:

- Elevate the value of parent voice and parental engagement to staff;
- Increase parent participation in regional parent support groups;
- Increase father involvement;
- Focus on investigations, family-based safety services, and foster care; and
- Improve services for children and families by implementing policy changes recommended by the committee.

Regional Parent Support Groups provide local opportunities for parents with open DFPS cases to obtain greater insight into the DFPS system. Regional Parent Support Groups help DFPS obtain input from parents on methods to improve safety, permanency and well-being for children receiving DFPS services, as well as provide opportunities for meaningful engagement of parents and families. The Statewide Parent Collaboration Group has been effective in helping to identify policy issues and best practices. Member input is included in the Texas Child and Family Services Review process, the Title IV-B State Plan, and the family-focused DFPS Practice Model.

Parent Support Groups throughout Texas are being held in regions 02, 03E, 04, 05, 06A, 07, 09, and 10 with continued coordination to conduct support groups in the remaining regions. These forums provide parents with DFPS process information in all stages of service. A parent facilitator leads the parent support group and shares their personal story, followed by a question-and-answer session about resources for parents. The parent program specialist provides support and technical assistance to the statewide Parent Collaboration Group and assists the regions to further expand their Regional Parent Support Groups.

## **7) Child Protective Investigation Best Practices**

**The Child Protective Investigation Best Practice Initiative responds to priorities (1), (2), (4), (7), and (13) of the Child Abuse Prevention and Treatment Act amendments.**

The primary goal for the Child Protective Investigation (CPI) Best Practice project is to identify and promulgate best practice models for the Texas child welfare system throughout the state and assist with the efforts to better achieve safety of children and families. The CPI Best Practice Project is focused on improving work in investigations for abuse and neglect. CAPTA-funded positions provide leadership for strategies that support improving safety outcomes with children and families involved in child abuse and neglect investigations.

A CPI deputy director of field and three division administrators supervise several program specialists who partner with each other, regional investigation staff, other DFPS program specialists, and external stakeholders. These positions focus on the development of protocols and policy ensure consistency across the CPI and all DFPS organizational levels.

- The CPI deputy director of field supports the director of field by providing direction and oversight to enhancing policy and practice. The deputy director reviews internal processes and procedures to ensure quality training, practice, and evaluations of casework.
- The CPI division administrator for alternative response is responsible for the policy and protocol regarding the program statewide, as well as strengthening the Alternative Response program to ensure it is embedded into practice.
- The CPI division administrator of best practice makes decisions regarding policy changes and implementation of practice changes within the regions; prepares tools to assist with training, presentations, or communications to the field; and makes recommendations about practice based on critical case reviews and trends. The CPI division administrator is responsible for providing materials that assist field management in ensuring staff are updated regularly on any policy or procedure practice changes. Materials include any tip sheets to ensure best practice.

Six program specialist positions are included in the project:

- Two behavioral health program specialists serve as the statewide subject matter experts for behavioral health issues of children related to the investigation stage of service. The behavioral health staff assist regional staff with accessing community resources for families seeking assistance with their child's mental health. Additionally, the behavioral health program specialists collaborate with HHSC on opportunities for diverting children and youth from entering DFPS conservatorship when an inability to access appropriate behavioral health services is the primary concern and refer those families to the HHSC Residential Treatment Center Diversion Bed program. Behavioral health program specialists also liaise with the HHSC Behavioral Health Services department to ensure any practices and policies developed are communicated appropriately. Behavioral health program specialists also provide training support to regional staff around mental health topics, update and maintain CPI mental health related policy, and update tip sheets and resource guides for staff.
- A child fatality specialist serves as the subject matter expert on CAPTA and state law requiring DFPS to release specific information to the public regarding abuse and neglect fatalities and near fatalities. The type of information released requires a combination of data elements and a written report. To ensure these reports are available timely and meet all legal requirements, the work needs to be centralized to a specific team. A child fatality program specialist is responsible for ensuring the completion of fatal and near fatal reports for public release, as well as tracking and reviewing fatal and near fatal reports for public release. The specialist ensures the Regional Child Death Review Committees and Citizen Reviews teams are functioning as required by attending meetings and reviewing and tracking all recommendations coming from the groups. The specialist identifies statewide trends in recommendations and ensures they are reviewed by the Child Safety Review

Committee and then tracks recommendations and actions coming from the committee. The recommendations from the Regional Child Death Review Committee, Citizen Review Team, and the Child Safety Review Committee consider issues with statewide implications for policy, training, resource development, casework practice, and coordination with external entities. They are shared with DFPS regional and State Office staff to determine improvement in safety outcomes with children and families involved in CPI and Child Protective Services (CPS) cases.

- Three best practice improvement specialists serve as the subject matter expert for strengthening investigation practice, including reviewing cases through a quality assurance lens to seek trend and outcome information when policy has changed. One specialist is the lead for safety and risk assessment across CPI and works to improve the overall quality of investigations through sound decisions around child safety and future risk. The specialist is responsible for providing guidance, direction, and training as needed to further develop critical thinking skills of investigators and supervisors. Two best practice generalist program specialist positions are responsible for project management for strategies to support the overall CPI operations. This includes policy review and coordination of feedback from field, working closely with the DFPS State Office to package information around policy, protocol, or practice changes to regional staff, and serving to represent field staff on interagency or interdivision committee work. In addition, the program specialist is responsible for providing education, direction, and assistance as needed with compliance around state statute related to disclosure of certain evidence to attorneys in a suit affecting the parent-child relationship prior to the full adversarial hearing, as well as other legislative changes resulting in the upcoming session.

The adaptive coaching program specialist position was moved to the CPI Alternative Response division to better support efforts to advance alternative response statewide practice. This position is responsible for developing policy, working with stakeholders in community, and serving the alternative response program as a trainer to support staff in understanding best practices in casework and engagement with families utilizing the Alternative Response philosophy and model.

There are ten CPI mentor program specialist positions, three of which are CAPTA-funded positions within the CPI Best Practice project. The mentor specialists report to the CPI division administrator of leadership and staff development. These mentor program specialists model CPI leadership characteristics expectations to prepare the next generation of supervisors.

The mentor program specialists infuse best practice and leadership development with the following responsibilities, including but not limited to:

- Recruiting mentors;
- Facilitating mentor orientation and pairing of protégés with mentors;
- Tracking mentor training and supporting completion of individual training plans and competency evaluations;
- Consulting with staff at all levels from protégé and mentor to supervisor and program director;

- Facilitating growth and development of the mentor program through the facilitation of recognition events, developing and updating resources, facilitating mentor support and cohort feedback groups, etc.;
- Analyzing mentor and protégé collaboration and successful training, including assessment of mentor qualifications and progress; and
- Attending and presenting data at staff and leadership program gatherings.

## **8) Child Protective Services Best Practices**

**The Child Protective Services Best Practice Initiative responds to priorities (3), (7), (9), (12), (13), and (14) of the Child Abuse Prevention and Treatment Act amendments.**

The primary goal for the Child Protective Services (CPS) Best Practice project is to identify and promulgate best practice models for the Texas child welfare system and assist with the cultural shift within DFPS necessary to better achieve safety, permanency, and well-being of children and families when a child is served in ongoing services beyond investigation.

The CAPTA-funded positions in this project provide leadership for strategies to address areas with an ongoing need for improvement, as identified through quarterly Child and Family Services Review case reads. Examples include the need for better engagement of families in case planning, especially fathers; reduction of permanency barriers; and strengthening access to substance abuse and other behavioral health services.

There are nine positions assigned to the following subject matter areas: domestic violence, parent engagement, fatherhood engagement, positive permanency (two positions), medical services, Interstate Compact for the Placement of Children (two positions), and IV-E eligibility determination. By partnering with other CPI and CPS program specialists, these positions focus on the development of protocols and policy that ensure the CPS Practice Model drives decisions and actions at all CPS levels.

The parent program specialist brings knowledge and skills to the position as a family member who has previously received CPS services. To better partner with families at all stages of service, it is important to have the parent voice represented in all CPS work aspects. This position provides feedback that assists in the analysis of policy and the evaluation of service delivery strategies. The parent program specialist coordinates and supports the state Parent Collaboration Group meetings, encourages parent, and helps CPS staff better understand the parent perspective. The parent program specialist participates in program planning, presentations, and implementation of parent support activities across the state.

The fatherhood program specialist provides leadership for strengthening engagement with CPS fathers. This position focuses specifically on increasing father involvement and has an active voice on the legal representation and parent resource workgroups. Each workgroup is designed to receive and give input on best practices around serving children and families. The fatherhood program specialist helps to increase the involvement of

fathers when CPS is working with families at all stages of service delivery. The fatherhood program specialist regularly shares information, resources, and time with fellow agency personnel and community stakeholders working with fathers and families. The Fatherhood Program Specialist routinely presents and actively advises staff and community organization on methods to better engage fathers. The fatherhood program specialist acts as a mentor for several young people along with multiple service providers.

The domestic violence program specialist serves in a leadership role to strengthen the intervention into and prevention of domestic violence in partnership with adult victims and children while challenging behaviors and encouraging deterrence of persons using violence. The domestic violence specialist co-chairs the Texas Family Violence Interagency Collaborative, comprised of staff from DFPS including Adult Protective Services, CPS, and CPI; the HHSC Family Violence Program involving the women's health coordinator and Aging Services Coordination, and the Texas Council on Family Violence which coordinates policy and practice support to staff within the state agencies and those working in the local community-based family violence programs. The specialist is the agency lead for joint efforts to enhance victim safety and services, engage with persons using violence, policy development, practice guidance and training and technical assistance.

Two permanency program specialists serve to strengthen statewide practice and policy changes and improve positive permanency efforts. One specialist specifically works with internal and external workgroups and stakeholders to strengthen best practices in areas that help children and youth achieve positive permanency, including the Family Group Decision-Making process of permanency planning, the engagement of caregivers and caring adults, and the effective use of the child's plan of service. A second specialist dedicates attention to positive permanency by analyzing the trends available from placement data and the impact it has on permanency. With dedicated attention to placement issues, the impact of changes in practice and protocol will be better understood. Both positions ensure an emphasis on the sense of urgency needed to help children safely exit care to a permanent home as soon as possible.

Two Interstate Compact on the Placement of Children (ICPC) program specialists focus on improving and assisting in achieving permanency for children moving across state lines. These program specialists ensure any barriers to completing a home study are identified and incoming and outgoing home study requests, completed home studies, initial placements and supervisory reports are processed within the Association of Administrators of Interstate Compact on the Placement of Children-regulated time frames. The program specialists ensure children being placed between states are monitored by a courtesy worker and safety and services are provided for a successful placement.

A medical services program specialist helps develop policy, practice, and protocol to assist caseworkers and caregivers in responding appropriately when medical services are required for foster youth. They assist when claims are denied by STAR Health, provide guidance regarding entry assessments for youth in foster, and educate staff about medical consent policies. This position is responsible for analyzing trends and ensuring

caseworkers have the support and technical assistance needed to help kinship and residential caregivers receive medical care needed for children which reduces caregiver frustration, improves care to children, and positively impacts placement stability and permanency.

A Mental Health Specialist Lead and two Mental Health Specialists help to address the increasing prevalence of high acuity needs to for children and youth in conservatorship. The impact of abuse and neglect trauma in an environment with increased social distancing and stress due to COVID, as well as the ongoing impact on capacity for some services, has seen an increase in need for intensive behavioral health services, including inpatient and outpatient services. This position helps to monitor youth for whom there is a challenge in obtaining services to address the higher acuity needs, focusing expertise on referrals to services within the Texas public mental health system. The positions also support caseworkers through facilitation of multi-disciplinary staffing's designed to arrange needed services, assist in transitions, and prepare for discharge from inpatient settings. This team also helps to support access to specific services provided through Health and Human Services (YES Waivers, mobile crisis team, Local Mental Health Authorities, system navigators).

The federal/state support services program specialist supports billing researching and resolving service level errors. This position assists in ongoing quarterly Title IV-E quality assurance reviews. The position conducts research into tuition waiver adoption assistance related requests and supports the ongoing efforts to transition eligibility-related documentation into the One Case electronic record system. In addition, the program specialist supports the unit's Supplemental Security Income (SSI) and adoption assistance subject matter experts. The position also has an ongoing role in testing foster care eligibility IMPACT functionality.

A youth housing specialist is focused on creating a former foster youth-dedicated housing program with the goals of assisting in locating housing for as many youths as possible; and ending homelessness for those transitioning from foster care to a successful adulthood. The strategies to achieve these goals include:

- Provide information and training about rental assistance programs and voucher options throughout Texas;
- Designate and train regional housing liaisons as local points of contacts in all regions and Stage II SSCC providers;
- Conduct outreach to public housing authorities and increase partnerships;
- Increase referrals to these rental assistance programs; and
- Support additional housing options, such as the Supervised Independent Living, Transitional Center Housing, Transitional Independent Living, and traditional Housing Choice Voucher programs.

An employment program specialist works to expand and grow internships, apprenticeships, and vocational rehabilitation services; increase youth and young adult job preparedness and readiness, especially through hands on activities; and strengthen and define DPFS relationships with the Texas Workforce Commission, workforce

solutions boards, and transition centers.

Four positions work in the DFPS Center for Learning and Organizational Excellence (CLOE) to infuse changes to practice in training for staff. An operations manager liaises between training and program, coordinating ongoing communication and training efforts, such as the month Meeting in a Box training or the significant leadership conferences.

Two director positions – one for permanency and one for well-being – lead the work in improving outcomes for permanency changes and for medical and behavioral health improvements. Practice improvements and changes to kinship care and efforts to address complex medical and behavioral health needs for youth in conservatorship are the primary focus for these two positions.

A new manager is proposed to supervise clinical coordinators, specialty staff working directly to assist youth for whom placements to meet their complex needs have not been found. These youth have significant trauma and a number of them have spent significant time in runaway episodes, psychiatric hospital stays, juvenile justice settings, not achieving stability. Capacity to meet the needs of these particular youth has been a significant challenge. A manager supervising staff addressing changes to family-based safety services is focused on transitions in some areas to contracted services and pilots, exploring effective ways to work with families in their own homes and statutory changes.

## **9) Community-Based Care**

### **Community-Based Care responds to priority 3, 11 and 13 of the Child Abuse Prevention and Treatment Act amendments.**

Recognizing that children and youth in the Texas foster care system are best cared for in their home communities whenever possible, DFPS embarked on a mission to redesign the foster care system to optimize the location of providers and services in the areas in which they are needed and expand the spectrum of residential services to meet children and youth needs.

Since 2010, DFPS has engaged in an effort to further expand the role of community providers to take responsibility for placement services, capacity and network development, community engagement and the coordination, and delivery of services to children in foster care and their families under a SSCC.

Community-Based Care changes the manner in which DFPS procures, contracts, and funds services for children and youth in foster care and their families. The performance-based model incorporates a collaborative decision-making, community-based approach to foster care and service planning which relies heavily on good communication, the ability to solve problems quickly, and enhanced partnership between DFPS and the SSCC.

In 2017, the 85th Texas Legislature directed DFPS to expand the redesign effort to include the purchase of case management and substitute care services from a SSCC through

community-based care. Substitute care includes both foster care and relative and kinship placements. Purchasing substitute care and case management services from the provider community allows DFPS to focus on child safety by investigating reports of abuse and neglect, providing in-home, family-based safety services, and ensuring quality oversight of the foster care system. Ensuring individual children achieve timely permanency becomes the responsibility of the SSCC.

Community-Based Care guiding principles are aimed at improving quality of care and include:

- Keeping children and youth safe from abuse and neglect;
- Placing children and youth in their home communities;
- Placing children and youth in the least restrictive setting that meets their needs;
- Minimizing moves that disrupt children's or youth's personal connections and educational progress;
- Placing children and youth with siblings;
- Respecting the culture of each child and youth;
- Providing children and youth with opportunities, experiences, and activities similar to those enjoyed by their peers who are not in foster care;
- Preparing youth for successful adulthood;
- Providing children and youth opportunities to participate in decisions that affect their lives.
- Reunifying children and youth with their biological parents when possible; and
- Placing children and youth with relative or kinship caregivers if reunification is not possible.

Implementation of the community-based care system is anticipated to:

- Increase the number of children and youth placed with their siblings and in their home communities;
- Increase the number of children and youth who remain in their school of origin;
- Decrease the average time children and youth spend in foster care before achieving permanency;
- Decrease the number of moves children and youth experience while in foster care;
- Decrease the duration and intensity of services children and youth need while in foster care due to improved well-being and behavioral functioning; and
- Create robust and sustainable service continuums in communities throughout Texas.

Senate Bill 1896, 87th Legislature, Regular Session, 2021, created the Office of Community-Based Care Transition (OCBCT) which is managed by the community-based care director, who supervises three directors: two for implementation and one for outreach and legislative relations. OCBCT supports successful implementation of community-based care across the state and ensures a robust continuous quality improvement process by which community-based care is evaluated and is responsible for working with stakeholder partners and DFPS staff to establish the model and support statewide implementation. This project enables DFPS and OCBCT to strengthen expertise in SSCC oversight and support ongoing data production and analysis for performance-based contracting and continuous quality improvement. Costs associated with start-up and

staged transfer of administrative functions, coordination to support implementation in identified catchment areas, and consultant resources for project management were initially funded in this project during past fiscal years but have now been integrated into normal CPS operations funded through the Texas Legislature.

## **10) Kinship Project**

### **The Kinship Collaboration Group responded to priority (3) in the Child Abuse Prevention and Treatment Act Amendments.**

The Kinship Caregiver Collaboration Group model provides a mechanism to include the voice of kinship caregivers who have received services from DFPS in the design, implementation, and evaluation of DFPS programs, policies, and services. Through this initiative, DFPS is involved in an effort focused on encouraging collaboration with kinship caregivers who have been affected by the DFPS service delivery system while providing a unique and valuable perspective on how to improve services to families and children.

The Kinship Caregiver Collaboration Project serves to:

- Identify service gaps to kinship caregivers and children;
- Identify the services that are working and should continue;
- Identify areas of policy needing improvement;
- Provide an avenue for kinship caregivers to recommend policy changes;
- Identify ways kinship caregivers can be instrumental in improving a caseworker's skills in relating to kinship caregivers;
- Facilitate kinship caregiver volunteer participation by removing barriers associated with travel, per diem, and childcare expenses;
- Provide resources, direction and guidance to the regional meetings to effectively expand and sustain regional Kinship Support Groups;
- Provide deliverables to staff and kinship caregivers to help inform caregivers and strengthen placement stability;
- Support the disproportionality efforts at the regional and state level; and
- Improve policy and practices related to engagement of kinship caregivers.

Regional Kinship Caregiver Support Groups are facilitated by regional DFPS and community-based care staff, along with kinship advocates who are part of the Kinship Collaboration Group. These local and statewide support groups provide opportunities for kinship caregivers with open DFPS cases to obtain greater insight into the DFPS system. The Kinship Caregiver Support Group provides kinship caregivers with lived experience in the DFPS system an opportunity to share their experiences and knowledge of the system with kinship caregivers currently involved with DFPS. These groups provide opportunities to obtain input from kinship caregivers for improving safety, permanency, and well-being for children receiving DFPS services, as well as opportunities for support and meaningful engagement of kinship caregivers and families. Kinship Support Groups are held regionally throughout the state with collaboration and coordination using virtual platforms.

## **11) Implementation of Federal Family First and Prevention Services Act Project**

**The Implementation of Federal Family First and Prevention Services Act Project responds to priorities (2), (6), (7), (11), and (12) in the Child Abuse Prevention and Treatment Act Amendments.**

The federal Family First and Prevention Services Act (FFPSA) seeks to reduce entry in foster care, limit the use of congregate care, and increase access to substance abuse, mental health, and in-home parent skill services. DFPS shares these goals and works closely with federal and state staff and stakeholders to analyze the impact to the child welfare system. Part of the analysis is assessed fiscal impact to the state, needed statute changes, and examined the required implementation timelines. Based on the analysis, Texas decided to delay implementation of certain provisions of FFPSA, including:

- 472(k)(2) of the Act: Limitations on Title IV-E foster care maintenance payments for placements that are not foster family homes; and
- 472(k)(1)(B) and 475A(c) of the Act: Qualified Residential Treatment Program (QRTPs).

The FFPSA Project will help DFPS and stakeholders:

- Analyze the federal legislation and determine the impact to DFPS, service providers, residential childcare providers, and the children and families served by DFPS;
- Determine the fiscal impact of the legislation;
- Ensure consistent communication relating to FFPSA; and
- Participate in implementation activities related to the federal legislation.

A FFPSA program specialist works within a specialized FFPSA division to project manage, advise, and provide technical assistance to DFPS staff with assignments and tasks associated with the federal legislation. The FFPSA Project oversees the FFPSA development, analysis, and implementation and mandates and consults with regional and DFPS State Office management, regional caseworkers, and field staff; CPS State Office program and policy staff; external public and private stakeholder; CPS consumers; volunteers; advocates; judges; and other social service providers to provide program guidance relating to the FFPSA.

A dedicated FFPSA budget analyst position was created to help internal and external stakeholders understand the FFPSA, state direction for a response, and the complex funding requirements associated with options under state considerations.

**12) Substance Use Project**

**The Substance Use Project responds to priorities (1), (2), (3), (4), (5), (8), and (13) in the Child Abuse Prevention and Treatment Act Amendments.**

The Substance Use Project supports the collaborative relationship between DFPS, HHSC, and the Texas Department of State Health Services to strengthen efforts to address substance use disorders impacting the safety, permanency, and well-being of children involved with the Texas child welfare system. Two dedicated positions within CPI (i.e., two substance use disorder program specialists) and four dedicated positions within

CPS (i.e., a behavioral health services division administrator and three substance use disorder program specialists) assist staff and stakeholders who work with the Texas child welfare system, social services agencies, substance use disorder treatment agencies, hospitals with labor and delivery units, medical staff, public health and mental health agencies, and maternal and child health agencies.

Specifically, the project facilitates collaboration and development of a stronger service delivery coordination between child welfare staff, providers of substance use services, and others. The Substance Use Project emphasizes the strengthening of protocol, policy and practice associated with plans of safe care, when required, and collaboration with Texas substance use disorder representatives to improve current plan of safe care standards to enhance communication between DFPS and agencies providing treatment or other support services related to substance use treatment. The staff within this project provide technical assistance and support to frontline staff through knowledge and coordination of substance use disorder services and resources in a manner that strengthens the knowledge and skills of staff working with families who have substance abuse issues pertaining to DFPS involvement.

### **13) Trauma-Informed Care Project**

**The Trauma-Informed Care Project responds to priorities (6), (7), and (13) in the Child Abuse Prevention and Treatment Act Amendments.**

The Trauma-Informed Care Project supports the collaborative relationship between DFPS and stakeholders including the Statewide Trauma-Informed Care Collaborative sponsored by the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (the Children's Commission), child-placing agencies, therapeutic service providers, and legal stakeholders including courts in an effort to address trauma-related issues that impact the well-being of children involved with the Texas child welfare system. In 2021, the CPS Trauma-Informed Care team, which includes a trauma informed care manager and six regional specialists, were hired to assist internal DFPS staff and stakeholders who work with the Texas child welfare agency, social services agencies, mental health agencies, and kinship and foster placements.

Specifically, the project seeks to ensure DFPS staff are thoroughly trained on trauma-informed care practices and approaches. The team helps to develop expertise in knowledge and coordination of trauma-informed care services for children and families in any stage of service, improve the coordination between DFPS and stakeholders including Statewide Trauma-Informed Care Collaborative sponsored by the Children's Commission, child-placing agencies, therapeutic service providers, and legal stakeholders including courts, and provide trauma-related consultation and training to DFPS staff members.

**A. Descriptions, Accomplishments and Proposal of Projects/Initiatives  
Using CAPTA Funds  
(FY 2023 Accomplishments)**

Listed below are the major accomplishments for each of the FY 2023 projects/initiatives that were selected from the 14 areas delineated in section 106(a)(1) through (14) of CAPTA.

**1) Evaluation of CPS Best Practice Initiatives-**

**The Evaluation of CPS Best Practice Initiatives responds to priorities (1), (4), and (7) in the Child Abuse Prevention and Treatment Act (CAPTA) Amendments.**

The Evaluation of CPS Reform and Best Practice Initiatives are designed to carry out analyses that will benefit Texas children by improving the efficiency and effectiveness of the CPS program. Understanding the impact of these changes is important to assure initiatives result in improved outcomes. The main accomplishments of the DFPS Analytics and Evaluation team during fiscal year 2023 are as follows.

- Streamlined the external research request process to improve efficiency of CPS program staff review and support collaboration with external researchers;
- Supported efforts on tracking, reporting, and analyzing runaways and human trafficking;
- Continued to evaluate DFPS efforts to reduce disproportionality and completed the legislatively mandated annual Rider 17 report and an annual disproportionality report;
- Supported efforts to reduce the number of children without placement through support with tracking, dashboards, and in-depth data analysis; and
- Hired, developed, and retained quality employees, including conducting an initial analysis and currently further evaluating the use of Title IV-E tuition stipends to develop and retain a strong workforce.

The DFPS Analytics and Evaluation team engaged in activities related to the goals and objectives of the Title IV-B State Plan, such as the following ongoing activities:

- Supported efforts to address disproportionality with the monitoring of disproportionality with the legislatively mandated Rider 17 report and the annual report for DFPS;
- Hired, developed, and retained quality employees, including conducting an initial analysis and are currently further evaluating the use of Title IV-E tuition stipends to develop and retain a strong workforce;
- Evaluating the risk assessment to improve child welfare assessments; and
- Continuing to support efforts to reduce the number of children without placement through support with tracking, dashboards, and in-depth data analysis.

**2) Disproportionality Efforts**

**The Disproportionality Program responded to priorities (3) and (11) of the Child Abuse Prevention and Treatment Act amendments.**

DFPS continues with its commitment to addressing disproportionality and disparate outcomes throughout the agency. The DFPS Office for Addressing Disproportionality and Disparities (OADD) staff continues to cover the robust work in Texas with following accomplished activities in fiscal year 2023:

- Hosted workshops for all staff levels and community partners around promoting and enhancing more favorable outcomes across all demographics, cultural humility, and addressing systemic issues that result in negative outcomes for the children and families;
- Achieved capacity with regional assistance by both internal and external stakeholders, to facilitate poverty simulations for community stakeholders to increase the understanding of vulnerable populations, specifically children and families who are impoverished;
- Continued to consult in collaboration with CLOE and all DFPS program areas on the development of a cultural humility training designed to help child welfare staff develop awareness, knowledge, and skills related to supporting positive outcomes for youth and families involved with the child welfare agency; these courses will be part of the continuous learning program for new supervisors and workers, delivered to direct delivery staff in Texas' 11 regions, as well as an additional course, "Supervisory Strategies to Support anti-bias and cultural framework", designed to provide supervisors with strategies to support caseworkers in social work available upon request;
- Continued to discuss computer-based training on race, culture, and cultural humility;
- Continued to review outcome data by race and ethnicity to ensure equitable and family-centered services; data is shared with the community and other partners;
- Reviewed policies and practices to ensure equity of services for all children and families and participated in major workgroups to ensure disproportionality is addressed at all levels of the DFPS organizational structure;
- Continued collaboration with the three federally recognized Tribes in Texas; and
- Continued to make virtual and in-person presentations at stakeholder requests for numerous local, state, and national events.

Fiscal year 2023 results of disproportionality efforts statewide have demonstrated the following:

Goal	Measure
Train staff trained in cultural responsiveness	<ul style="list-style-type: none"> <li>• Continue to offer disproportionality webinars and trainings to internal staff and external stakeholders.</li> <li>• Continue to procure courses to enhance cultural humility.</li> </ul>

Goal	Measure
Place African American children with family members when possible	<ul style="list-style-type: none"> <li>• 677 African American children exited to permanent kinship caregivers in fiscal year 2022.</li> <li>• 902 African American children exited to permanent kinship caregivers in fiscal year 2023.</li> </ul>
Increase recruitment of African American foster and adoptive homes	<ul style="list-style-type: none"> <li>• In fiscal year 2022, CPS added 219 African American foster and adoptive homes. OADD works with foster/adoptive home development staff on issues related to disproportionality and disparities. OADD supports the work of the DFPS Advisory Committee Promoting Adoption of Minority Children, as set forth in the Texas Administrative Code. The advisory committee consists of regional representatives familiar with child welfare issues who are appointed by the DFPS Commissioner to serve a two-year term. The advisory committee enjoys a close connection to faith-based stakeholders in efforts at both the regional and state level to make recommendations to the DFPS Commissioner to promote the adoption and provision of services to minority children. The advisory committee meets quarterly and hosts community forums to coordinate and support local and regional efforts to promote adoption and positive outcomes for minority children. In fiscal year 2022, the advisory committee held four community forums in areas of the state that show significant rates of disparate outcomes for children.</li> </ul>
Collection and dissemination of data	<ul style="list-style-type: none"> <li>• Released Rider 33 report on removals by race and ethnicity.</li> <li>• Released disproportionality report in 2023.</li> </ul>
Cross Systems Collaboration	<ul style="list-style-type: none"> <li>• Participation in national level Indian Child Welfare Act calls.</li> <li>• Participation in the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families (the Children's Commission) disproportionality efforts, collaborative council, and training committees.</li> <li>• In September 2022, the CPS disproportionality manager participated in the Casey Family Programs meetings with child welfare and race</li> </ul>

Goal	Measure
	<p>equity advocates from several states to discuss disproportionality efforts.</p> <ul style="list-style-type: none"> <li>• The CPS disproportionality manager continues to present at stakeholder requests.</li> <li>• Participation in Travis County Child Welfare Race Equity Collaborative.</li> </ul>

### 3) Children with Disabilities Project

#### The Children with Disabilities Project responded to priorities (7), (9 a and b) and (13) of the Child Abuse Prevention and Treatment Act Amendments.

Developmental disability specialists served as subject matter experts for services related to children with intellectual and developmental disabilities and provided consultation and training to assist staff in securing available services and specialized placements for these children. Six of the twelve regional developmental disability specialist positions are in close proximity to general residential operations serving children with intellectual and developmental disabilities. These are the Mission Road Developmental Center, Whispering Hills, the Autism Treatment Center and Casa Esperanza. The distribution of the developmental disability specialists across the state benefited children and youth with intellectual and developmental disabilities by improving case planning, permanency planning, and transition planning. The conservatorship worker in the child and youth's legal county has increased knowledge about the child and youth's needs through coordination with the developmental disability specialist, thus aiding in permanency planning and increasing the continuity of case management services. The developmental disability specialists ensure the child and youth's needs are met in the child's placement by participating in case planning, transition planning, assisting with locating least restrictive placements, and identifying appropriate long-term services and supports.

The developmental disability specialists focused on the needs of all children and youth with intellectual and developmental disabilities across the state, including being available for consultation and technical assistance to other stages of service, such as investigations and family-based safety services cases.

The developmental disabilities specialists utilized a monthly report providing data on children with specific characteristics to improve identification of children with intellectual and developmental disabilities. Using this report, they were able to outreach to caseworkers and supervisors and assist with obtaining services and supports for children with intellectual and developmental disabilities. The developmental disability specialists continued to track and monitor statewide data to identify trends and training needs throughout the state. They provided training to CPS staff, foster parents, other state agencies, community partners, and providers regarding issues affecting children with intellectual and developmental disabilities on both an individualized and formal basis. The regional developmental disability specialists transitioning to the Community- Based Care model provided several trainings on the role of the Developmental Disability Specialist,

the Medicaid waiver programs, and guardianship to the SSCCs and their staff. The developmental disability specialists assisted in case planning activities, identifying specific needs and services to meet the needs of children with intellectual and developmental disabilities, including individual case consultation with staff and participation in permanency conference meetings.

The developmental disability specialists utilized a quarterly report providing data on children who are deaf or hard of hearing to improve services and provide community resource options. If a child is identified as deaf or hard of hearing, the developmental disability specialist can work with the child's team to explore any service and waiver options, including community resources as well as DFPS internal resources such as medical and nursing services and education and well-being specialists. The DFPS State Office developmental disability specialist is participating in an ongoing training collaboration between DFPS and the United States Department of Health and Human Services to discuss services available to people who are deaf or hard of hearing. This information will be presented to staff at both agencies through a series of reoccurring webinars. DFPS is completing training to be posted to the internal Meeting In A Box information page.

The developmental disability specialists held quarterly teleconferences facilitated by the DFPS State Office developmental disability specialist. Topics covered in these teleconferences included training to increase awareness of and resources for children with intellectual and developmental disabilities, permanency planning, policy clarification, trends within the local intellectual and developmental disability authorities and the Home and Community-based Services enrollment process, availability of services under the Home and Community-based Services waiver programs, service delivery and coordination with partner agencies, and discussions on methods to outreach to caseworkers and providers to improve services for children with intellectual and developmental disabilities.

The DFPS State Office development disability specialist held an in-person meeting with all the developmental disability specialists and several community partners to provide training and updates in the areas of housing options, the waiver programs, disability rights, deaf and hard of hearing resources, and mental health resources. The development disability specialists were provided with training and resources to share within their regions. The DFPS State Office developmental disability specialist will be meeting with the supervisors of the regional development disability specialists to clarify responsibilities and expectations of the disability specialist role while ensuring consistent service is provided across all regions.

An interagency partnership arrangement that provides an innovative, long-term supportive housing program through the Section 811 Project Rental Assistance program whose purpose is to meet the needs of people with disabilities in the program's target populations has existed since 2008. DFPS had several young adults who aged-out of care and were accepted into the Texas Department of Housing and Urban Affairs Section 811 Project Rental Assistance Program. The program provides project-based rental

assistance for extremely low-income persons with disabilities linked with long-term services. The program created opportunities for participating former foster youth with disabilities to live as independently as possible through the coordination of voluntary services and providing a choice of subsidized, integrated rental housing options. The developmental disability specialists will continue to utilize this program, and as of August 31, 2023, expect to see several younger adults benefitting from the program.

The DFPS State Office developmental disability specialist worked closely with HHSC staff to streamline and monitor the guardianship referral process to referral timeliness. The DFPS State Office developmental specialist also provided training to DFPS regional directors, the residential treatment placement coordinators, and child-placing units regarding placement and service options for youth with intellectual and developmental delays. The regional developmental disabilities specialists routinely offer training to all stages of CPS workers to ensure the best advocacy for this population.

The DFPS State Office developmental disability specialist served as a member of the Aging-Out of Care Workgroup tasked with assisting with transitional planning for youth aging-out of CPS care. The DFPS State Office developmental disability specialist presented youth aged 17 or older with intellectual and developmental disabilities or significant mental health issues to the workgroup to review and staff with the youth's CPS or community-based care teams. Monthly staffing's were held to ensure an appropriate plan for the youth was in place prior to the youth turning age 18. The DFPS State Office developmental disability specialist followed up with the youth's CPS caseworkers to ensure recommendations were followed and needed actions were being taken.

The DFPS State Office developmental disability specialist participated in the *Texas Story Workshop with Person-Centered Training* re-writing three training vignettes to ensure more continuity with CPS casework issues. These training scenarios were completed and are now included in the nationwide person-centered training curriculum.

The DFPS Office developmental disability specialist conducted visits at several facilities providing placement for children with intellectual and developmental disabilities including Mission Roads, Casa Esperanza, the Norris Academy, Davidson's Respite, and Pathways Habilitative Homes. The DFPS State Office developmental disability specialist visited with the children and met with the agency directors and therapeutic teams to determine plans for the children in these placements, as well as talk about certain supports being provided to ensure all the children's needs were being met. The DFPS State Office developmental disability specialist will return this summer to the institutional placements of Mission Road and Casa Esperanza to continue to staff permanency goals and ensure children ready for a less restrictive placement are being considered for other placement options.

The DFPS State Office developmental disability specialist continued to work closely with the DFPS Community-Based Care team including program and subject matter specialists to create SSCC workflow processes to guide these agencies in working with the regional and DFPS State Office development disability specialists to ensure continuity of services

for youth with intellectual and developmental disabilities. These processes included guidelines for placement into general residential operations Mission Road and Casa Esperanza, guidelines for the Medicaid waiver programs, and guidelines for placements into home and community-based child specific contracts. All workflow processes have been shared with the Community-Based Care teams. The DFPS State Office developmental disability specialist continues to provide training and guidance to the Community-Based Care teams on these processes and other issues regarding youth with intellectual and developmental disabilities.

The DFPS State Office development disability specialist assisted the Children's Commission with updating the *Children's Commission Bench Book*. This guide presents the courts with a list of available DFPS and community resources to assist court officials when working with children or other family members with disabilities or significant medical needs.

The DFPS State Office and regional developmental disability specialists presented as a panel member at the local intellectual and developmental disability authority. Streamlined work processed and increased communication were discussed, as well as some of the challenges DFPS faces when trying to obtain waiver services. The DFPS State Office developmental disability specialist reached out to multiple HHSC partners to continue these discussions.

The DFPS State Office developmental disability specialist provided training to the members of the judicial community in Region 06. The presentation covered the definitions of intellectual and developmental disabilities and how to identify an individual who may be eligible to receive services under the Medicaid waiver programs as well as what individuals can be best served and may be most successful in this type of placement. The DFPS State Office developmental disability specialist provided training to several judges individually through Lunch and Learn or TEAMS meeting options to discuss best ways to advocate for the youth with intellectual or developmental disabilities in DFPS conservatorship.

The developmental disability specialists coordinated with the Children's Advocacy Centers of Texas and the Texas Educational Agency to provide training on service coordination of the different resources each agency can offer to community partners working with youth with intellectual and developmental disabilities.

The DFPS State Office developmental disability specialist coordinated with community partner EveryChild, Inc., to review and staff the children residing at Mission Road and Casa Esperanza ensuring least restrictive placement options were being explored. Recommendations were obtained from the youth's therapeutic teams at Mission Road and Casa Esperanza to determine if the child was ready to move to a less restrictive setting. The DFPS State Office developmental disability specialist met with HHSC representatives to discuss how to best utilize EveryChild, Inc., as well as develop a process of review and searching for potential placements not disruptive to the child.

During 2023, the DFPS State Office developmental disability specialist served on the

following workgroups with external stakeholders: Policy Council on Children and Families including participation in the legislative workgroups addressing long-term services and education, employment, and childcare; the Texas Respite Advisory Committee; the Promoting Independence Advisory Council; Parallel Tracks; Aging and Disability Resources; the Youth Peer Partnering Together Committee, the Employment and Meaningful Day Workgroup, and the Texas Respite Care Conversation facilitated by Texas A&M University. The DFPS State Office developmental disability specialist also provides monthly training and resources to newly promoted supervisors during their basic skills development training and participated in monthly calls with Youth for Tomorrow the DFPS third party reviewer of child service levels and the statewide placement team. The DFPS State Office developmental disability specialist also participated in the HHSC and DFPS behavioral leadership meeting

The DFPS State Office developmental disability specialist attended multiple training sessions presented by HHSC and the Social Security Administration held to ensure all resources available to the youth are utilized. Priority is being given in SSI claims to youth identified as having a disability. Open communication continues with HHSC to ensure continuity of care within the Home and Community-based Care programs.

#### **4) Education Project**

**The Education Project responded to priorities (3), (7), (9a and b), and (13) of the Child Abuse Prevention and Treatment Act Amendments.**

The education specialists expanded their roles to support students and caregivers during the COVID pandemic and build community collaborations that support children in foster care. The Education Project activities in 2022 included the following accomplishments:

- Education specialists continue to ensure school age children have an education portfolio. HHSC Residential Child Care Licensing staff and the Residential Monitoring team from the Texas Education Agency incorporate the task of reviewing for education portfolios during their regular monitoring visits. The DFPS Federal and Program Improvement Review division monitored the use of the education portfolio in structured case reviews. Monthly reviews and feedback were given to given to the education specialists to resolve issues. Education specialist have continued to promote the use of education portfolios and started an education portfolio initiative push across the state. The goal is to increase the number of children with portfolios.
- Education specialists provided surrogate parent training and certification for persons supporting children with special needs, attended Admission, Review, and Dismissal meetings, and participated in Circles of Support to review the student's current education status and offer students post-secondary education and vocational training options and opportunities.
- Representatives from CPS and the Texas Juvenile Justice Department named key agency liaisons and subject matter experts to increase academic, vocational, and transitional services to incarcerated foster youth. Regional education specialists, working with juvenile justice personnel, participated in planning for youth's education and transitional goals. The DFPS State Office education program specialist participated in quarterly conference calls with state agency liaisons.

- Education specialists worked with caseworkers and Community-Based Care agencies to support DFPS policies that ensure educational stability for children in foster care directed by federal laws, such as Every Student Succeeds Act (ESSA) and the Fostering Connection to Success and Increasing Adoptions Act. Education policy directs caseworkers to consult regional education specialists prior to any child's placement move which may result in moving the student from his or her school of origin. Education specialist have been holding 'Ask the Expert' panels to clarify ESSA rules. Build Up Conferences held by education specialist create strong advocating teams for students.
- Policy and residential contract elements continue to address the early education services for children from age 0 to 5 years. Children in DFPS care from age 0 to 3 years are referred to local early childhood intervention offices for assessment and services. Early childhood intervention services fiscal year 2022 data shows 6,509 children who were "CPS involved" were referred to the program. "CPS involved" means the child was referred by DFPS or the family was currently involved in a DFPS investigation; the child is in substitute care or part of a family receiving family-based safety services. This number reflects referrals from all stages of service and includes children referred for a developmental delay who were not in foster care. Of the 904 children referred to Early Childhood Intervention who were "CPS involved."
- Caregivers enroll children in pre-kindergarten programs offered in local public schools or through Head Start, if available in the community. The Texas Education Agency reported that 2,495 children in foster care enrolled in free pre-kindergarten programs available at Texas public schools during fiscal year 2021. DFPS sent Letters of Verification requested to parents and caregivers of children ages 3 to 5 years to use for pre-kindergarten enrollment.
- Texas Head Start, Early Head Start, and DFPS continue their joint commitment to provide quality early education programs for children in foster care. Head Start identifies children in substitute care as a priority enrollment.
- DFPS published its quarterly internet education newsletter for caregivers, child-placing agencies, kinship providers, external stakeholders, and DFPS staff. The newsletter provides information to ensure a seamless enrollment process for all students attending pre-kindergarten through grade 12. Topics during fiscal year 2022 included: Basic CPS 101, An Inside Look at CPS; Education Training Voucher and Fee Waiver programs; Preparing for an Admission, Review, and Dismissal committee meeting; Cyber Security; Transition Services for Students in Foster Care and Receiving Special Education Services; Creating a Trauma-Informed Classroom; and Foster Care Student Success Guide 101.
- The Children's Commission, The Texas Education Agency, and DFPS continued to collaborate on recommendations by the combined Education Committee which is divided into subcommittees to work on guidance specific to educational needs of children and youth in residential treatment facilities, Every Student Succeeds Act, and special education.
- Education specialists completed approximately 111 virtual and in-person presentations to participants at school districts, education service centers, Court Appointed Special Advocates (CASA), and family court judges on education-related issues about maintaining education stability, strategies for behavior interventions for trauma-

induced children, and special education law.

- Education specialists analyzed data to improve the education and overall well-being of children and youth in foster care. One of the areas was to identify and reduce the number of placements moves which required students to also change schools. Education specialists worked with students without placement to ensure education stability by informing others on education laws and address any unmet needs for students needing special education services while in the situation of children without placement.
- Collaboration with the 20 regional education service centers which support children and youth in foster care continued. Each education service center has appointed a foster care liaison to work with school districts and DFPS. Many of the education service centers hosted regional and community consortiums. Regional education specialists provided additional training in Foster Care 101 and trauma-informed strategies to incorporate into classrooms.
- The Texas Higher Education Coordinating Board appointed a foster care liaison to provide services and training to institutions of higher learning on the opportunities available to students formerly in foster care. Texas colleges and universities also appoint “college champions” to facilitate services and counseling to former foster students enrolled in their institutions. Education specialists attend annual Texas Reach and Texas Workforce Commission Conferences within the state.
- The DFPS State Office education specialist partnered with the DFPS Transitional Living Services Employment program.
- Regional education specialists collaborated with DFPS staff in transition planning events, Preparation for Adult Living classes, Circles of Support, and case planning. Education specialists are working with Preparation for Adult Living staff to ensure educational outcomes for graduating high school students.
- The regional education specialists track and monitor high school junior and senior students in foster care who may be at risk of not completing requirements for a high school diploma within five years of entering high school. Regional education specialists work with CPS and Preparation for Adult Living staff and high school students to deter high school dropouts and promote dual credit, early college programs, credit by exam, and credit recovery programs in an effort to increase high school graduation numbers for students in foster care.
- The education program specialist provided training to staff on documenting school enrollment in IMPACT to better collect data on children remaining in their school of origin.

## **5) Texas Council of Child Welfare Boards**

### **The Texas Council of Child Welfare Boards responded to priority (11) in the Child Abuse Prevention and Treatment Act amendments.**

The Texas Council of Child Welfare Boards’ (the Council) two most significant accomplishments this past fiscal year are the Council’s participation in the Capstone Program of the Texas A&M University Bush School of Government and Public Service and development of the new Council website. These are delineated below with other

noted accomplishments.

- The Council held two in-person meetings, two Executive Committee meetings, and a host of on-going committee meetings throughout the year.
- The Council Continued to address findings and recommendations from the Capstone Project through Texas A&M University which is a group of master-level students who worked exclusively with the Council to analyze, research, and formulate recommendations to assist the Council in all areas of the organization. During this process they researched the literature and conducted 22 interviews and 6 focus groups, composed of both internal and external stakeholders of the Council, its members, and committees. The student team worked a total of 3,061.25 hours on the project. Their conclusions consisted of development of a strategic plan with all Council members, development of SMART (Specific, Measurable, Achievable, Relevant, Time-bound) goals for each of the standing committees. Since the conclusion of this project all Council committees have been adopting and working on their SMART goals through their ongoing committee work. The Council as a whole is working through the findings and recommendations.
- The Council continued to actively take action on the Council website ([www.tccwb.org](http://www.tccwb.org)) which was outdated and no longer user friendly. This year was spent on developing a new website, and this was accomplished in Spring 2023. The new website was developed entirely by Council membership including an ad hoc committee dedicated to this effort. All committees assisted with this effort. Data was reviewed for relevance, suitability, and currency.
- The Council continued its partnership with and support of Fostering Brighter Futures, a web-based service to promote positive attention to foster parenting and encourage positive acceptance and support for the vital need for foster parents across Texas. The Council will use the campaign to saturate Texas communities with more consistent, positive messages regarding foster care. Fostering Brighter Futures hosted a college student intern for one semester to assist with the campaign.
- In partnership with Day One Bags, the Council received and distributed to local child welfare boards and Rainbow Rooms a supply of 4,000 bags for youth entering foster care and graduating seniors in the foster care program. All were posted on the website and the local boards on the website were updated.
- The Council provided flyers, awareness materials, and educational handouts to local boards statewide to promote Texas GO BLUE Day and BLUE Sunday for Child Abuse Awareness month in April.
- The Council updated the county child welfare board membership rosters with the assistance of the faith-based and community engagement specialists and the regional child welfare boards across the state. The Council also provided and updated roster and lists for all Rainbow Rooms.
- The Council continued as a member of TexProtects Roundtable which meets to prioritize Texas Legislative issues impacting the Texas child welfare system and address system improvements.
- The Council's education committee reviewed the child welfare board training manual posted on the Council website for local and regional child welfare boards' use. The Council conducted on-site training for regional and local child welfare boards and provided technical assistance to boards struggling to either form or maintain

operations. Throughout the year, the Council Executive Director provided technical assistance to boards struggling to either form or maintain operations.

- The Council presented Texas State Representative James Frank with the David M. Williams Award in 2022 or over and above efforts in community championing for children.
- Council members operate a private Facebook group page exclusively for its members to informally share information, ideas, suggestions, and promote convenient dialogue and communication for them throughout the state.

## **6) Parent Collaboration Group**

**The Parent Collaboration Group responded to priority (3) in the Child Abuse Prevention and Treatment Act Amendments.**

Statewide Parent Collaboration Group Advisory Committee virtual meetings were held due to the COVID-19 pandemic. The Statewide Parent Collaboration Group Advisory Committee, or its individual members, accomplished the following:

- Participated at the National Federation of Families Conference;
- Participated on the Children's Commission's Task Force for Court Appointed Legal Representation Workgroup; Parent Resource Workgroup; and Legal Practice and Process Committee;
- Provided numerous parental inputs to policy; and
- Presented at the 2022 Texas Foster Care Conference, Together for Families Conference, and Fall 2022 Child Judges Conference.

## **Workgroups**

- Round Table/Judicial Commission on Mental Health;
- Thriving Family Safer Children Design Team;
- Family Consultant for Capacity Building Center for States – Casey;
- Parent Advisory Council – FRIENDS;
- Texas Prevention & Early Intervention;
- Research on Race Equity;
- Thriving Family Safer Children Lived Experience Workgroup; and
- Race Equity Improvement Collaborative.

## **7) CPI Best Practices**

**The CPI Best Practice Initiative responds to priorities (1), (2), (4), (7), and (13) of the Child Abuse Prevention and Treatment Act amendments.**

The CPI director of policy and practice facilitates a monthly State Advisory Group for program directors and administrators to facilitate information exchanges regarding practice between the regions and obtain input that informs investigation practice improvements.

The behavioral health program specialists in this project are the statewide subject matter experts for behavioral health issues of children related to the investigation stage of service. Opportunities for diverting children and youth from entering DFPS conservatorship due to an inability to access appropriate behavioral health services were the primary emphasis during this fiscal year. These program specialists also provided support to field staff as it relates to policy and best practice when working with family and children impacted by mental health needs. This support included maintaining and responding to mental health email box questions, serving as liaisons between field staff and stakeholders, working in partnership with families, providing various trainings, developing tip sheets to aid in staff awareness of common behavioral health issues, and assisting in critical thinking as it relates to engagement and best practice. During the past year, the behavior health program specialists assisted CPI staff with training, consulting, and processing referrals to the Mental Health Diversion Bed Project. The behavioral health program specialists updated policy, practice, and procedures related to mental health support protocols and post adopt services.

Another CPI best practices specialist assisted the field staff with education on best practice as it relates to assessing risk and safety. The specialist assisted with ensuring best practice and policy were aligned. They assisted with various tasks set forth by the best practice and field the division administrators. The program specialist assisted regional directors with case reviews and training specific to the case reviews to help improve practice throughout the regions and state.

The best practice specialist focused on risk and safety, reviewed serious physical abuse cases of children aged 5 and under and reviewed cases of parents who have had prior terminations of their parental rights and gave birth to new children. This best practice specialist worked effectively with investigations caseworkers, supervisors, and program directors to come up solutions, strategies, and tasks to ensure the safety and well-being of children that met specific criteria. This specialist also identified information needed for "Meeting in a Box" to ensure staff were kept up to date on policy and practice changes.

The child fatality program specialist ensured the completion of fatal and near fatal reports for public release and tracked these reports. The specialist ensured the Regional Child Death Review Committees and Citizen Reviews teams were functioning as required, accomplished by attending their meetings and reviewing and tracking their recommendations. The specialist analyzed statewide trends in recommendations and ensured their review by the Child Safety Review Committee, tracking all recommendations and actions coming from the Child Safety Review Committee. The recommendations from the Regional Child Death Review Committee, Citizen Review team and the Child Safety Review Committee consider issues with statewide implications for policy, training, resource development, casework practice, and coordination with external entities. They were shared with regional and DFPS State Office staff to help improve safety outcomes with children and families involved in CPI and CPS cases.

## **8) CPS Best Practices**

## **The CPS Best Practice Initiative responds to priorities (3), (7), (9), (12), (13), and (14) of the Child Abuse Prevention and Treatment Act amendments.**

The primary goal for the CPS Best Practice project is to identify and promulgate best practice models for the Texas child welfare system to assist with the cultural shift within DFPS necessary better achieve safety, permanency, and well-being of children and families. The following accomplishments by all staff within this project occurred during 2022:

- Resource Guide maintenance for policy and protocol related issues;
- Monthly Meeting-In-A-Box distribution and training of regional direct delivery staff on policy updates and initiatives affecting children in conservatorship; and
- Interagency Collaboration Groups regarding family engagement, father engagement, and domestic violence groups.

The parent engagement specialist continued to coordinate and support the state Parent Collaboration Group meetings, encouraged parent involvement, and made efforts to help staff better understand the parent perspective. The parent program specialist continued to participate in program planning, presentations, development, and implementation of parent support activities across the state. This position was involved in providing parental feedback and input on the following policies:

- Closing family-based safety services case within 10 days;
- Services inappropriate with investigations;
- Proposed family-based safety services administrative closure policy update;
- Child and family participation in family group decision making meeting;
- Selecting an Adoptive Family;
- Foster/adoptive development policy and disaster procedures;
- CPS Heightened Monitoring;
- Primary medical needs – consideration for change clarification;
- Temporary absence from paid placement;
- Requesting extension of an intensive psychiatric treatment program placement;
- CPS personal documents resource guide to youth – House Bill 700;
- Educating children and youth about their medical care;
- Family-based safety services in-person contacts policy update; and
- Hearing legal proceedings resource guide per House Bill 2924.

The Parent Support Groups work to help support families experiencing the foster care system and support reunification of families. This is accomplished through support groups facilitated by parent liaisons who provide information about the CPS system and promote personal growth.

Parents and caregivers experiencing the child welfare system endure many interviews and meetings with professionals surrounding events in question, how they arrived at this point in their life, and where they see a path forward. Parents need support from peers, as well as the professionals. Peers who have experienced similar circumstances offer a different level of support and understanding than a professional and/or advocate. Studies

involving nationwide networks serving parents who battle mental health challenges, substance abuse disorders, domestic violence, and the child welfare system show regular participation in a support group has the ability make all the difference.

The parent liaison volunteers are one of DFPS' greatest assets. Volunteers commit and provide their time without the reward of financial gains. This year, parent liaisons:

- Answered parent questions by accepting phone calls;
- Supported parents by attending court hearings or other meetings;
- Served as long-term mentors for parents even after DFPS exit;
- Spoke with community partners, legal advocates, judges, and other interested people about their volunteer services and impact on parents' experiences with the child welfare system; and
- Provided feedback and expertise on policy and/or practice changes they believe will have a positive impact on child safety, well-being, and permanency, as well as increase likelihood of reunification.

The fatherhood specialist helped plan and moderate multiple fatherhood engagement activities across the state, including the two culture-relevant father panels featuring Black and Brown fatherhood practitioners from across the state. The fatherhood specialist conducted a series of webinars addressing disproportionality and working with families and fathers with incarceration history. The fatherhood specialist moderated a series of fathers' panels with external stakeholders to foster a better understanding of resources needed and/or available for fathers throughout the state. The fatherhood specialist traveled across Texas conducting training with staff and community stakeholders on the value of engaging fathers and paternal kin which could lead to permanency or less time in the child welfare system. The fatherhood specialist conducted a series of training sessions with community partners such as Texas CASA and the Texas Juvenile Justice Department. The fatherhood specialist is working with the domestic violence specialist and Texas Council on Family Violence to develop as a series of webinars addressing fathers and domestic violence.

The fatherhood specialist created a quarterly report that provides staff with insight on father engagement levels within their region and served on both the Children's Commission's Legal Representation and Parent Resource workgroups with a focus on providing fathers and parents access to legal representation as soon as possible. The fatherhood specialist served on the Texas Re-Entry Task Force where the "Work in Texas" website was launched to connect formally incarcerated people with employers willing to hire those with challenged backgrounds. The fatherhood specialist released multiple tip sheets for staff, such as "Working with Incarcerated Parents" and "Assisting Formerly Incarcerated Fathers and Families with Reentry Plan." The fatherhood specialist often invites formerly incarcerated fathers to meetings with staff to add a personal voice to the work and challenges around the incarcerated community.

The fatherhood specialist joined the Fatherhood Interagency Workgroup to better facilitate and establish improved communication with services providers. The fatherhood specialist meets routinely with the Parent Collaboration Group to consult with parents and

staff while offering spaces for fathers. The meeting gives fathers the opportunity to be heard by staff and community stakeholders and share the point of view of a father within the child welfare system.

The domestic violence program specialist co-chaired the Texas Family Violence Interagency Collaborative, comprised of staff at the HHSC Family Violence and Aging Services programs and Women's Health Coordination, multiple DFPS divisions, and the Texas Council on Family Violence. The collaborative recently invited conservatorship staff to participate in its work and obtaining more feedback and input from the contracting entities in regions 02, 03A, 03B, and 08.

The collaborative revised the statewide memorandum of understanding (MOU) template for DFPS and family violence shelter centers and non-residential programs to reflect changes in both state and federal laws, as well as policy and practice improvements. All state-level agreements are executed. Collaborative members continue to work toward ensuring the local section of the MOU is signed by the local family violence programs and DFPS regional staff. The new MOU incorporates a review process for the Texas Family Violence Interagency Collaborative with the state-level section examined in odd-numbered years and the local section in even-numbered years. This ensures the MOU remains timely, useful, and is signed by appropriate parties whenever changed. Changes to the MOU are anticipated in light of legislative actions during fiscal year 2023.

Training for new workers on intervening with persons who are harming children and their mothers, or an adult caretaker was expanded from 8 to 12 hours and implemented across the state in cooperation with the DFPS Center for Learning and Organizational Excellence. This training is updated continuously as policy and practice guidance improves. The domestic violence specialist typically presents workshops at statewide conferences for the executive directors and staff of local family violence shelter centers and providers of the battering intervention and prevention programs. In-service training is provided for DFPS staff in Statewide Intake, Adult Protective Services, CPI, and CPS, as well as attorneys and the faith-based and community engagement staff. Staff is also able to request case consultation with the domestic violence specialist as necessary to obtain a more effective intervention and ensure the best practice and policy guidance is followed.

The domestic violence program and the fatherhood program specialists are collaborating on a series of trainings to increase the effectiveness of staff in working with persons using violence. In coordination with the Texas Council on Family Violence, four computer-based webinar trainings supplemented by written reference materials are planned to assist caseworkers and supervisors in outreach and intervention with persons using violence. The content includes nine computer-based trainings, as well as resources developed by other agencies and organizations. The goal is to increase caseworker confidence in working with persons using violence in fiscal year 2023.

In cooperation with the Texas Council on Family Violence and the Texas Department of Criminal Justice, Community Justice Assistance division, outreach to increase the number of battering intervention and prevention programs contracting with DFPS is

underway and will continue until every region in the state has providers who can assist persons using violence. In 2021, work with DFPS contract staff was completed to streamline the Battering Intervention and Prevention program from an over 200-page solicitation to make it free-standing for nonprofit organizations and private accredited providers to apply. This went into effect September 2021 and the number of contractors has increased. Along with the review of the MOUs, potential revisions to the *Disposition Guidelines for Domestic Violence* will be reviewed. These guidelines were adopted in 2016 and previously reviewed in 2019. Continued reviews allow the opportunity to ensure language is clear and policy guidance is appropriate and consistent with other policy shifts and training.

One of the two permanency program specialist specifically works with internal and external workgroups and stakeholders to strengthen best practices in the Family Group Decision-Making process of permanency planning. The specialist also focuses on practices to strengthen the engagement of caregivers and caring adults in helping children and youth achieve positive permanency, as well as practice to improve the effective use of the Child's Plan of Service as a tool to help achieve positive permanency.

The program specialist oversees policy and best practice for the implementation of the model and philosophy for all stages of service; credit reports for children and youth in conservatorship; other policy reviews and initiatives affecting children in conservatorship. This position gathers, reviews, and disseminates data monthly on Family Group Decision-Making; holds at least quarterly conference calls for Family Group Decision-Making supervisors in the region; and provides technical assistance regarding Family Group Decision-Making issues. This position acts as one of the main liaisons with the three major credit bureaus – Equifax, Experian, and TransUnion – and instructs a team of program specialists on running batch reports for each region completed by the end of the fiscal year to better prepare youth for their exit from care. Any negative information is disputed in order to clear the youth's credit. This position has been involved in policy changes for person characteristics definitions, Adoption and Foster Care Reporting and Analysis System (AFCARS) updates and training, services to families, personal documents provided to youth, entry of legal actions and legal statuses, reinstatement of parental rights, the Child's Plan of Service, and participation in family meetings.

A second permanency program specialist dedicates attention to positive permanency by analyzing the trends available from placement data and its impact on permanency. With dedicated attention to placement issues, the impact of changes in practice and protocol are better understood. By viewing permanency and placement trends together, the emphasis of urgency needed to help children safely exit care to a permanent home as soon as possible is strengthened. This position:

- Reviewed best practice guides and policy updates regarding areas such as child sexual aggression and sexual victimization training materials and practice guides, caregiver notification, positive permanency, concurrent planning, and improving training for conservatorship and ongoing services staff;
- Reviewed permanency related tools, such as the conservatorship case read training and dashboard, caregiver provider portal, and reunification stage monitoring and

- coordination with Family Preservation;
- Scheduled, coordinated, and facilitated monthly calls with subject matter experts, as well as primary and secondary caseworkers, supervisors, program directors, and program administrators to assess permanency and strengthen practice around youth aging-out of care or exiting as older youth;
- Scheduled, coordinated, and facilitated quarterly calls with local permanency specialist supervisors and program directors to assess and respond to field needs and improve practice around the local permanency program;
- Developed a staff presentation as a tool for training, policy, and best practice knowledge around the permanency position and how to utilize the permanency subject matter expert for assistance in achieving positive permanency outcomes for children in care;
- Analyzed proposed legislation relevant to CPS ongoing services that impact permanency.
- Participated at the request of the director of permanency in various workgroups relevant to conservatorship casework and practice, including but not limited to Language Services and Supervised Independent Living;
- Participated in monthly meetings with the Texas Family Violence Interagency Collaborative;
- Conducted technology and information systems testing for technology changes related to permanency; and
- Scheduled and organized the Local Permanency Summit.

The division administrator for permanency directly supervised the following subject matter expert positions: domestic violence, parent engagement, fatherhood engagement, education specialist, and positive permanency (two positions). In March 2023, the organizational structure of this division changed to include the kinship program specialist. The following subject matter experts were moved under the Field division: domestic violence, parent engagement, fatherhood engagement, and education specialist.

During fiscal year 2023, the division administrator for permanency position was audited to change to a director I position (incorporated into proposal for budget at the end of this section). The associate director of permanency will supervise the following subject matter expert positions: positive permanency (two positions), kinship, youth housing, youth employment, and adoption. The change in this position will allow the associate director of permanency to partner with subject matter experts across CPS and CPI to strategize ways to strengthen services necessary to better achieve safety, permanency and well-being of children and families.

Two additional (ICPC) program specialists were added to the ICPC unit, to focus on improving time frames to achieve permanency for children moving across state lines. These program specialists process incoming and outgoing home study requests and completed home studies within time frames that allow children to be placed across state lines within the time regulated by the Association of Administrators of Interstate Compact on the Placement of Children. ICPC program specialists ensure barriers to the processing of a home study request and completion of a home study are identified and amended in

a timely manner.

The ICPC program specialists assist in ensuring incoming home study requests are processed and assigned in a timely manner to comply with the Safe and Timely Interstate Placement Act. The additional ICPC program specialists have helped reduce the length of time it takes to process a home study request, allowing the Texas ICPC team lead specialist to focus on the barriers that prevent home studies to be completed in a timely manner. In fiscal year 2022, the ICPC unit processed 2,156 incoming home study requests and 2,091 outgoing home study requests. The two additional ICPC program specialists prevented excessive backlog in processing home study requests, as well as completed home studies, 100B placements, supervisory reports, and case closures while maintaining a caseload of approximately 300 children.

Foster/Adoptive Home Development division promotes adoptions of children in DFPS conservatorship. Last year, DFPS strengthened best practices by sending 14 CPS adoption management staff members from across the state to the North American Council on Adoptable Children (NACAC) annual virtual conference in July 2022. This year DFPS will again send designated staff for an in-person NACAC conference in July 2023. Adoption staff will have the opportunity to develop knowledge and skills in the core issues in adoption, trauma and loss, effective therapeutic techniques in adoption, kinship care and birth family connections, parenting children with disabilities, and many more topics. The Foster/Adoptive Home Development division developed and distributed promotional items for foster/adoptive home development, adoption, and the Texas Adoption Resource Exchange (TARE). Regional foster/adoptive home development and adoption staff attend recruitment and adoption events which require them to interface with the public. These promotional items will assist DFPS in recruiting foster and adoptive families, as well as adoptive homes for children awaiting adoption. The items include, but are not limited to, hand sanitizer, post-it notes, flyers, banners, bookmarks, tablecloths, and pens. These items display the DFPS, Foster/Adoptive Home Development, or TARE logo to promote the work done by DFPS and encourage engagement by the public.

The medical services program specialist continues to receive and track notification of denials due to “lack of medical necessity” and “services not being a Medicaid benefit.” The program specialist tracks individual denials and reviews for trends. A process to escalate requests for assistance and educate the field and caregivers about denials and available support was created. The emphasis ensures caseworkers have the support and technical assistance needed to help kinship and residential caregivers respond to denials which has a time sensitive protocol. The goal is to reduce caregiver frustration, improve care to children, and positively impact placement stability and permanency.

The medical services well-being specialist manager enables the support of well-being specialists and regional nurse consultants divided into two geographic teams. The position ensures every region, whether served by legacy CPS staff or a SSCC to have access to assistance regarding STAR Health, the Texas Medicaid managed care program for children in foster care.

The mental health program specialist team which includes a team lead and two specialists

supports the state with expertise in children's mental health services provided by HHSC and 39 local mental and behavioral health authorities across the state. Complex eligibility and a network of services make access to the services confusing to direct delivery staff. With the services provided by this team lead, information regarding state hospital eligibility and services, mobile crisis outreach teams, services provided by local mental and behavioral health authorities, how to access emergency assessments for youth discharged from psychiatric hospitals, eligibility for the Youth Empowerment Services waiver, and other services and technical assistance provided when needed.

The federal/state support services program specialist played a ongoing key role in the Title IV-E/state-funded quarterly quality assurance foster care eligibility reviews. The specialist also supported the resolution of billing related errors and waiver requests. In addition, this position supported several regions Title IV-E foster care eligibility-related functions when these regions were experiencing staffing issues. The position participated in IMPACT testing related to IMPACT congregate care placement eligibility functionality.

The youth housing specialist facilitated, presented, participated, or produced the following:

- Facilitated quarterly regional housing liaison meetings with the designated housing liaisons and the Texas lead for the United States Department of Housing and Urban Development (HUD) and the Section 811 point of contact. This helps facilitate the timely sharing of information, and provides opportunities to address issues, concerns, and share successes across the state.
- Participated in monthly meetings with Section 811 program, HHSC, Texas Network of Youth Services, statewide Communities of Care, and other stakeholders.
- Facilitated continued development of the DFPS housing program to include oversight of Youth Targeted Rental Assistance Programs including Foster Youth to Independence, Family Unification Program, and the Section 811 Project. Foster Youth to Independence and the Family Unification Program are administered by local public housing authorities.
- Produced updated outreach and housing program materials including launching the new housing plan which is a resource tool for staff and young adults for a guided discussion on housing, housing options, obtaining documents, screening for eligibility, and creating an action plan for securing housing. Other materials include housing readiness, rental assistance program eligibility screening, and PowerPoint training documents.
- Facilitated regular updates to the DFPS housing program webpage which provides a centralized location for all information, materials, and resources pertaining to housing overall. Creating a new housing program PowerPoint focused on the development of the housing program overall and shared the elements for making successful program.
- Facilitated updating regional housing liaisons to be the point of contact in each region for housing program information and options including designated back up points of contact/regional housing liaisons.
- Presented at numerous conferences and meetings including DFPS program directors; conservatorship, faith-based support, and disability staff; and various units across the state. Presented at the Texas Workforce Commission and Education Reach 2023

annual conferences. Facilitated several Section 811 program referral agent trainings required to apply for this program directly. Prior to these trainings DFPS had one referral agent for the entire state., but now has more than 150 referral agents and plans to continue at least two statewide trainings a year.

- Facilitated outreach to local public housing authorities to introduce the Foster Youth to Independence program to increase partnerships to expand this program statewide. Produced 35 partnership agreements and now each region has at least one partnership. Maintaining 16 Family Unification Program partnerships across the state. Facilitating increase utilization of the Section 811 program statewide by advocating for a waitlist preference for young adults with foster care involvement, creating a real-time availability option and removing other barriers.
- Produced and maintained a housing program master list to track all outreach and program activities. Facilitated a Foster Youth to Independence partnership MOU audit to ensure agreements were in place, updated, and current, including obtaining a copy of all agreements for State Office files. Facilitated Foster Youth to Independence data verification project that involved reaching out to all public housing authorities with a Foster Youth to Independence agreement to ensure the DFPS self-reported Foster Youth to Independence data was as accurately as possible.
- Facilitated 630 Foster Youth to Independence applications and issued 307 vouchers to house 200 youth overall. Facilitated 645 Family Unification Program vouchers utilized as of November 2022. Facilitated 53 Section 811 applications to house 14 youth overall.

The transitioning youth lead facilitated, presented, participated, or produced the following:

- Facilitated and/or provided technical assistance which resulted in formal agreements between DFPS State Office and the Texas Workforce Commission and the DFPS regional offices, 23 out of the 28 (remaining 5 are in process) local Workforce Development Boards and local Transition Centers. These agreements were jointly developed and entered into to address the unique challenges facing youth and young adults currently or formerly in foster care transitioning to a successful adulthood, including improving employment outcomes for these youth and young adults. This year the corresponding Transition Center covering the Board area were included in the local agreements to better define and outline roles and responsibilities of each entity (DFPS, Board and Transition Center) in addressing the job readiness, career development, vocational rehabilitation and employment needs of youth and young adults currently or formerly in foster care.
- Presented at the Texas Workforce Commission Commissioner's Meeting to accept the Governors Proclamation of Foster Care Awareness Month May 2022 on behalf of DFPS, Preparation for Adult Living Teen Conference June 2022, Texas Workforce Commission Foster Youth Conferences March 2022 and April 2023, Statewide Youth Leadership Council meetings.
- Participated and/or led meetings or workgroups related to employment or barriers to employment such as: ongoing Senate Bill 2054 driver education and exams waiver implementation meetings, quarterly Drivers meetings, Monthly HHSC Employment and Meaningful Day workgroup, quarterly Texas Workforce Commission Foster Youth Transition Center meetings, periodic Region 3 North Central Texas Workforce

Solutions Board internships, bi-annual Senate Bill 1220 Career Development and Education workgroup with community partners, monthly Vocational Rehabilitation Services meetings, periodic DFPS State Office ordering birth certificates for youth at age 15, weekly House Bill 700 implementation meetings to include important documents, quarterly and periodic federal meetings related to employment and other independent living services, and monthly statewide Preparation for Adult Living staff technical support meetings.

- Provided regular employment related resource materials to DFPS Preparation for Adult Living Staff, transition center staff, Preparation for Adult Living contractors and other community advocates. Also, this position worked with the Texas Workforce Commission to improve and provide regular reports to DFPS to include the DFPS/Texas Workforce Commission referral match data, bi-annual “What Employers Want” Skill Demand Data broken down by DFPS region, and an employment outcomes dashboard that includes data provided by the DFPS transition centers workforce advocate to the Texas Workforce Commission.
- Worked with Texas Workforce Commissions’ Vocational Rehabilitation services to grow youth participation through partnerships across DFPS and DFPS contractors and external stakeholders.

The Texas Workforce Commission provides funding to each independently operated transition center to hire a workforce advocate specifically to assist youth currently in or formerly in foster care with their employment goals and navigate workforce services and resources. DFPS staff, Workforce advocates at transition centers, caregivers, and Preparation for Adult Living contractors refer youth aged 16 years and older to local Texas Workforce Solutions office's for job search and readiness assistance, career exploration, and employment and training services. Each board has designated a point of contact for staff and youth to access for assistance and services. All youth and young adults are encouraged to register in the state job search system [www.WorkInTexas.com](http://www.WorkInTexas.com) For more information about foster care programs at Texas Workforce Commission: <https://www.twc.texas.gov/partners/foster-care-programs>

The mentor program specialists have expanded the CPS Mentor Initiative in the following ways:

- Recruitment events and presentations for the purpose of obtaining new mentors;
- Participated in regional improvement meetings to discuss the mentor program and ensure understanding of regional challenges and solutions;
- Provided ongoing support through in-person and virtual meetings with new protégés, mentors, supervisors, and program directors to address mentor and protégé training needs and successful pairing through case assignability of the new employee;
- Initiated timely pairing of new employees and mentors and tracking progress through the 13-week training program;
- Initiated timely payment of mentor stipend through payroll system when paired with a protégé and tracked required training for mentors;
- Began Regional Mentor Support Groups to ensure ongoing collaboration and support of mentors;
- Recognized mentors within their regional areas through regional monthly broadcasts,

Lead mentor designations and awards, recognition events, DFPS newsletter articles; and

- Participated in and trained to facilitate The Leadership Challenge™ to promote the leadership skills of regional staff.

In August, CPS leadership from around the state gathered for the *2022 Inspiring Resilience Through Vision and Leadership* retreat. During the conference, leaders heard from a variety of speakers to equip them with knowledge, tools, and techniques to build and inspire resilience. Each region had the opportunity to hear how to integrate resilience, play, and trauma-informed communication and connection into their work; experience a powerful explanation of how art has played a crucial role in developing personal resilience in a former foster youth's life; and come together and craft a vision specific to their area to promote resilience-building within their own teams.

A Placement Safety Analyst coordinates and reviews of residential facilities and foster homes to evaluate any risk or safety issues, assesses for trends, and coordinates responses and next steps with CPS field staff, Single Source Continuum Contractors (SSCCs), Residential Childcare Licensing (RCCL), Residential Child Care Investigations (RCCI), and DFPS Contracts, as necessary and appropriate. Reviewing reports on facilities and foster homes, developing, and tracking safety visits, coordinating pre and post Facility Intervention Team Staffing (FITS) activities, developing strategies to assess trends and patterns, and making recommendations to Placement leadership regarding safety measures for children in residential placements.

A Division Administrator of Training Support, Manager IV.

- Communicated policy updates, training opportunities, and resources available to field staff to promote understanding, skill development, and knowledge of statewide and regional supports for families through in-person meetings and monthly Meeting in a Box publications
- Increased timely case assignability of field staff through support, guidance, analyzing, oversight of processes and tracking timely training completion. In an effort to increase effective service to children/families, while seeking to reduce staff turnover, required trainings for all staff were communicated and tracked for completion
- Facilitated The Leadership Challenge™ training to state office, regional program directors & above to support leadership development
- Facilitated a six-month session of the CPS/CPI Leadership Book Club for regional program directors to promote connections across regional lines and increase communication and leadership growth
- Secured agreement with the University of Texas to facilitate Brené Brown's "Dare to Lead™" training to Regions 02, 11 and 06 leadership staff to address leadership topics of trust, communication, and vulnerability
- Secured, prepared, and planned roll out of The Leadership Challenge Self Empowered™ for CPS supervisors statewide

The Division Administrator for Family Based Safety Services (FBSS) Implemented, trained staff and continue supporting stakeholders and staff on the HB3041 Texas Family

First Pilot Program and continue program improvement with policy revisions, concurrent stages and analyzing new bills from the 88<sup>th</sup> Legislation Session.

## **9) Community-Based Care**

### **Community-Based Care responded to priorities 3, 11 and 13 of the Child Abuse Prevention and Treatment Act amendments.**

During fiscal year 2023, DFPS and the Office of Community-Based Care Transition (OCBCT) continued to develop the Community-Based Care model through legislative direction, guidance from the Public Private Partnership, work with a contracted independent consultant at Chapin Hall of the University of Chicago and work with a contracted independent evaluator with Texas Tech University.

Beginning in fiscal year 2018, DFPS secured a five-year contract with Texas Tech University to conduct a process evaluation of implementation of Community- Based Care Stage I. Texas Tech University will do another process evaluation for DFPS and OCBCT.

DFPS and OCBCT continue to work with Chapin Hall to provide independent dataanalysis of each SSCC's performance on placing children within their home communities and reducing paid foster care days. Continuously reducing the number of paid foster care days, either by having more permanent exits or shorter foster care stays, will result in payment of financial incentives in Stage III. DFPS and OCBCT anticipate that Stage III will begin for Regions 03W and 02 in Fall 2023

DFPS and OCBCT continued to meet quarterly with the Public Private Partnership, a representative group of stakeholders and advocates who serve as the guiding body for Community-Based Care. The Public Private Partnership plays an important role in guiding implementation decisions and making recommendations. In fiscal year 2023, the CPS associate commissioner, the community-based care director, and stakeholder representative co-chair used the partnership meetings to:

- Review Community-Based Care progress throughout Texas;
- Receive updates and provide recommendations on Stage I implementation activities from the published Community-Based Care Process Evaluation, CPS, and SSCC leadership partners in Regions 08B;
- Receive updates on Stage II implementation planning and updates from the Community-Based Care implementation team, CPS, and SSCC leadership partners in Regions 01, 02, 03B, and 08B;
- Receive updates on collaborative work among SSCCs around standardization of shared processes; and
- Gather input on the intersection of Community-Based Care and other system level projects and procedures.

The Information Technology (IT) and Data Access and Standards Governance Council continued meeting in fiscal year 2023 for the purpose of discussing the:

- SSCC needs;
- Prioritization of SSCC needs, especially implementation of interoperability; and

- Establishment of file transfer protocols and procedures, including procedures for them and future SSCCs.

Key planning and implementation tasks DFPS and OCBCT accomplished in fiscal year 2023 include:

- Successfully implemented Stage II in Region 08B;
- Successfully executed the Community-Based Care contracts for Regions 03E, 04, and 05. Successfully completed the Community-Based Care procurement for Region 03, including all 10 counties in the region; and
- Continued to modify contracts and operations as necessary to ensure compliance with federal court orders.

DFPS and OCBCT published a detailed *Community-Based Care Implementation Plan* in December 2022. The scope and timeframe for implementation is dependent on legislative appropriation, and the plan is required in statute to be updated each fiscal year. The implementation plan includes:

- Community-Based Care expectations and goals;
- Community-Based Care implementation approach;
- Timeline for implementation;
- DFPS and SSCC roles and responsibilities;
- Communications plan;
- Readiness tasks;
- Implementation tasks;
- Training plan;
- Evaluation and oversight plan;
- Progressive intervention plan; and
- Contingency plan.

### **Implementation Activity**

The 87th Texas Legislature continued support for implementation of five total Community-Based Care catchment areas to Stage I over the fiscal years 2022-23 biennium and expansion to Stage II into two areas.

- On March 1, 2020, Our Community Our Kids/ACH Child and Family Services assumed responsibility for all substitute care services to children and families in the Metroplex West community. Stage II continues for this SSCC.
- On June 1, 2020, 2INgage, a partnership between Texas Family Initiative, LLC, and New Horizons Ranch and Center, Inc., assumed responsibility for all substitute care services to children and families in the Big Country and Texoma, formerly the DFPS Region 02 community.
- On March 2, 2022, St. Francis Community Services, Inc., assumed responsibility for all substitute care services for children and families in the Panhandle community, formerly DFPS Region 01, Amarillo, and Lubbock.
- On October 1, 2022, Belong, a division of SJRC Texas, assumed responsibility for all substitute care services for children and families in the South Central and Hill Country community, formerly DFPS Region 08b and 27 counties in Region 08 excluding Bexar

County).

- DFPS and OCBCT received funding for four new catchment areas in the fiscal years 2022-23 biennium. The request for applications were released in the following catchment areas in April 2022: Metroplex East, formerly DFPS Region 03E; Permian and Concho, formerly DFPS Region 09; Piney Woods, formerly DFPS Region 04; and Deep East Texas, formerly DFPS Region 05.
- On February 22, 2023, DFPS awarded a contract to EMPOWER, collaborative of Spraberry, Adrienne Family Initiative, The Bair Foundation, Jonathan's Place, Pathways Youth and Family Services, and CK Family Services to serve as the SSCC for the Metroplex East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.
- On February 22, 2023, DFPS awarded a contract to 4Kids4Families, a division of Arrow Child and Family Ministries, to serve as the SSCC for the Piney Woods community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.
- On March 15, 2023, DFPS awarded a contract to Texas Family Care Network, a division of Pressley Ridge, to serve as the SSCC for the Deep East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.
- On March 23, 2023, DFPS and OCBCT posed a request for applications for the entire Metroplex West community which includes all 10 counties in the area. This application closed on April 20, 202, with anticipated contract start date to be September 1, 2023.
- Contingent upon legislative appropriations, DFPS and OCBCT will post a request for applications for a SSCC in the following community areas: Bexar County; Harris County; Bay Area and Montgomery; and El Paso.

### **Performance Measures**

As required by the 2020-21 General Appropriations Act, House Bill 1, Rider 15, 86th Texas Legislature, 2019 (Article II, DFPS Rider 15), DFPS and OCBCT is required to report on selected performance measures that allow for comparative analysis between the legacy foster care and redesigned foster care systems on March 31 and September 30 each year. The report includes an analysis of the data that identifies trends and impact occurring in the redesigned foster care system, identification and analysis of factors negatively impacting any outcomes, recommendations to address problems identified from the data, and any other information necessary to determine the status of the redesigned foster care system. DFPS completed and submitted the September 2022 and March 2023 Rider 15 reports, as required. The next report will be released with fiscal year 2022, quarter 3 data in September 2023.

### **Foster Care Capacity Stage I Objective**

The performance indicator most reflecting the foster care capacity challenge is the percentage of children placed close to home, defined in the metric as within 50 miles of removal. The percentage of children placed close to home continued to decline since fiscal year 2021 for the state as a whole, as well as for non-Community-Based Care areas. It has increased for SSCC providers in the Panhandle, Metroplex West and Big Country and Texoma designated community areas in fiscal year 2023, Quarter 1 compared to

fiscal year 2021. Placement proximity has decreased for South Central and Hill country in comparison to its baseline years, fiscal years 2020 and 2021.

The ability to place siblings in foster care together is another area impacted by system-wide foster care capacity challenges. SSCC providers in the Panhandle, Big Country and Texoma, and Metroplex West show performance improvements in keeping siblings together, increasing from fiscal year 2021 by 0.4 percent, 8.0 percent, and 0.3 percent, respectively. South Central and Hill Country saw a decrease of 7.1 percent in comparison to its baseline years. Non-Community-Based Care areas have declined with a 1.9 percent decrease in performance in in fiscal year 2023, Quarter 1 compared to fiscal year 2021.

Statewide, children are spending fewer placement days in a least restrictive setting compared to fiscal year 2021, and all designated community areas also saw a decrease in children placed in least restrictive settings.

All safety performance below 100 percent is an area to target for improvement. Statewide and Statewide Non- Community-Based Care child safety improved in fiscal year 2023, Quarter 1 compared to fiscal year 2021, Quarter 1, with all designated community areas improving compared to fiscal year 2021, Quarter 1 except Panhandle and Big Country and Texoma. South Central and Hill Country had the highest safety rate in fiscal year 2023, Quarter 1, at 100 percent.

### **Permanency Stage II Objective**

While placement with relatives or kin are the Stage II contract performance measures, the goal of Stage II is to improve exits to permanency, including both the number of children exiting to permanency and the speed at which they exit. Placement with kin generally improves child outcomes, including permanency, either with exits to kin or by facilitating connections to parents and placement stability, which are positively related to permanency.

Texas has historically performed well in placing children in state conservatorship with relatives or kin and finding relatives or kin to permanently care for children when reunification with parents is not possible. The performance measure is important to ensure SSCCs sustain or improve upon these trends. Non-Community-Based Care areas of the state declined by 3 percent between fiscal years 2021 and 2022. Metroplex West and Big Country and Texoma saw an increase between fiscal years 2021 and 2022 with 8.0 percent and 0.4 percent, respectively, and Panhandle had a decrease in children being placed with kin at 60 days after removal. South Central and Hill Country started Stage II in fiscal year 2023; and therefore, no data is available to report on SSCC performance for that area, as this measure is delayed.

With four designated community areas in Stage II, Section A performance metrics related to permanency become relevant. This report will not, however, give detailed attention to the Section A exit measures because the focus of this report is the Community-Based Care contracted performance measures. Risk adjusting for case mix has the advantage of determining if the change seen in the exit population was due to a process slow

down/speed or is attributable to change in the child population characteristics. That being said, it is worth noting there has been a statewide drop in the percent of the population exiting to permanency within 12 months since fiscal year 2018, as well in declines in all of the SSCC designated community areas from fiscal year 2022 to fiscal year 2023, Quarter 1.

### **Our Community, Our Kids – Metroplex West (Tarrant, Erath, Hood, Johnson, Palo Pinto, Parker, and Somervell counties)**

OCOK has contracted with DFPS for services to children in foster care since fiscal year 2015. Beginning in fiscal year 2020, Quarter 3, OCOK transitioned to Community-Based Care Stage II to include the provision of case management and kinship services for all children in conservatorship in designated community area Metroplex West, made up of the 7 counties around Fort Worth. The average performance for fiscal years 2018 and 2019 is used as the baseline average for comparison.

- **Safety in Foster Care** – 99.8 percent of children were safe in foster care placements as of fiscal year 2023, Quarter 1. Safety below 100 percent represents an area for improvement;
- **Placement Stability in Foster Care** – 1.18 foster care placements per child in fiscal year 2023, Quarter 1 shows an increase from the fiscal year 2022, Quarter 1 measure of 1.17.7 This metric is cumulative and requires a comparison of like quarters;
- **Least Restrictive Placement Setting** – 82.9 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline, but increased since fiscal year 2022;
- **Foster Care Placement within 50 miles** – 72.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter. This is an increase from fiscal year 2022 and slightly below the baseline years;
- **Sibling Groups Placed Together in Foster Care** – 63.3 percent of sibling groups were placed together on the last day of the quarter. This is below baseline but has increased since fiscal year 2022;
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time; and
- **Preparation for Adult Living** – 94.1 percent of youth turning 18 (includes youth in foster care, kinship care, and other settings in Stage II) completing Preparation for Adult Living shows a slight decrease from the previous year but well above baseline.

### **2INgage – Big Country and Texoma**

2INgage has contracted with DFPS for services to children in foster care since fiscal year 2019. Beginning in fiscal year 2020, Quarter 4, 2INgage transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Big Country and Texoma designated community area. This area is comprised of 30 counties covering a large rural area with historical capacity challenges. The average performance for fiscal years 2021 and 2022 is used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in 2INgage foster care placements. Safety below 100 percent represents an area for improvement.

- **Placement Stability in Foster Care** – 1.13 placements per child in fiscal year 2023, Quarter 1 is an improvement from fiscal year 2022, Quarter 1 performance of 1.14. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 86.7 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has declined since fiscal year 2021 and is lower than baseline.
- **Foster Care Placement within 50 miles** – 41.1 percent of children placed within 50 miles of their removal address on the last day of the quarter is an improvement from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 68.4 percent of sibling groups placed together. This is an increase from baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 77.8 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living in fiscal year 2023, Quarter 1, showing a large decrease from fiscal year 2022. Performance is below baseline.

#### **Saint Francis Community Services Inc. – Panhandle**

St. Francis has contracted with DFPS for services to children in foster care since fiscal year 2020. Beginning in fiscal year 2022, Quarter 3, St. Francis transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the Panhandle designated community area. This designated community area is comprised of 41 counties in an area of the state that faced significant capacity challenges prior to Community-Based Care implementation. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 99.9 percent of children were safe in Saint Francis foster care placements. Performance below 100 percent is an area for improvement.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is lower than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.49 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 has seen continued decline since fiscal year 2020 and is below baseline years.
- **Foster Care Placement within 50 miles** – 42.8 percent of children were placed within 50 miles of their removal address on the last day of the quarter, an increase from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 63.8 percent of sibling groups placed together on the last day of the quarter is above baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 61.5 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult

Living which is a large decrease from baseline years.

### **Belong – South Central and Hill Country**

Belong began serving children on October 27, 2021, and entered Stage II in fiscal year 2023, Quarter 1. Beginning in fiscal year 2023, Quarter 1, Belong transitioned to Stage II of Community-Based Care to include the provision of case management and kinship services for all children in conservatorship in the South Central and Hill Country designated community area. The average performance for fiscal years 2020 and 2021, the two years prior to Stage II implementation, are used as the historical average for comparison.

- **Safety in Foster Care** – 100 percent of children were safe in Belong foster care placements. 100 percent is always the target for safety.
- **Placement Stability in Foster Care** – 1.17 placements per child in fiscal year 2023, Quarter 1 is higher than fiscal years 2020 and 2021, Quarter 1 baseline. This metric is cumulative and requires a comparison of like quarters.
- **Least Restrictive Placement Setting** – 77.1 percent of placement days spent in a family setting (defined in Stage II as a family foster home, kinship home, adoptive placement, or return to parents) as of fiscal year 2023, Quarter 1 is below baseline years.
- **Foster Care Placement within 50 miles** – 37.7 percent of children were placed within 50 miles of their removal address on the last day of the quarter, a decrease from baseline years.
- **Sibling Groups Placed Together in Foster Care** – 55.4 percent of sibling groups placed together on the last day of the quarter, a decrease from baseline years.
- **Kinship Placement** – This measure is delayed by one quarter and not available at this time.
- **Preparation for Adult Living** – 76.9 percent of youth turning 18 (includes youth in foster care, kinship care and other settings in Stage II) completed Preparation for Adult Living which is a large decrease from baseline year.

### **10) Kinship Project**

#### **The Kinship Collaboration Group responded to priority (3) in the Child Abuse Prevention and Treatment Act Amendments.**

The Kinship Collaboration Group meetings are held quarterly and consist of up to 11 regional DFPS kinship liaisons and 12 kinship advocates, kinship caregivers whose DFPS cases have been closed. Kinship Support Groups are held regionally, with continued efforts to grow the program. Since development in September 2017, more than 300 Kinship Support Group meetings have been held throughout the state, providing support to more than 1,500 caregivers.

Accomplishments as of fiscal year 2023 include providing input on policy, adding the *Kinship Video Series* to staff trainings, and continuing to update the Kinship Caregiver Training. The Kinship Collaboration Group developed the “After the Call” brochure which is distributed to new kinship caregivers at the time of placement, and the group is in the process of

completing an “After the Case” brochure to address post permanency resources for kinship caregivers. The Kinship Collaboration Group developed marketing brochures to assist in educating caregivers regarding the verification process, kinship support groups, the DFPS kinship care webpage, the Texas Kinship Caregiver Facebook page, and assist caregivers in understanding permanency options for children in kinship placements. This group has also provided the voice of lived experience to the Texas Kinship Steering Committee, a statewide multi-agency collaboration of stakeholders which provided a framework for ongoing collaborative plans to better support kinship caregivers. The *Kinship Video Series* serves as a training tool for CPS staff regarding the kinship caregiver experience. The kinship caregiver training is updated to include the most recent legislative changes with input by the kinship advocates regarding content and implementation. The Kinship Collaboration Group has developed a *Kinship Values* staff training using the *Kinship Video Series*. The Kinship Collaboration Group is also working on creating a co-parenting model for kinship caregivers.

**11) Implementation of Federal Family First and Prevention Services Act Project**  
**The Implementation of Federal Family First and Prevention Services Act Project**  
**responds to priorities (2), (6), (7), (11), and (12) in the Child Abuse Prevention and**  
**Treatment Act Amendments.**

DFPS has worked closely with federal and state staff and stakeholders to analyze the potential impact to the Texas child welfare system. This includes collaborating with external entities to obtain input and establishing a communication plan to include key stakeholders and the Texas Legislature. It is important for the Texas Legislature to weigh-in on the policy and fiscal changes driven by this federal legislation.

DFPS continues to develop the analysis and fiscal impact as federal guidance is received and involves stakeholders as appropriate.

DFPS has partnered with key stakeholders to conduct a service array study to identify qualifying services for the new funds and where capacity would need to be developed. The study was received in March 2019 and helps inform decisions regarding implementation of a Texas kinship navigator program. Texas received another federal grant to assist in exploring the recommendations provided in the study.

DFPS was awarded a federal grant to assist in implementing an electronic case-processing system for ICPC cases. Texas ICPC launched National Electronic Interstate Compact Enterprise (NEICE) on March 15, 2023.

The Family First Prevention Services Act (FFPSA) specialist remains key in the success of DFPS’ accomplishments in both the understanding of this federal legislation and the development of the analysis and continues to support initiatives. The FFPSA specialist:

- Works under the direction of a Division Administrator for FFPSA to project manage, advise, and provide technical assistance to DFPS staff with assignments and tasks associated with the federal legislation;

- Continues to oversee the development of responses and analysis of new guidance, as required by FFPSA and the Administration of Children and Families. These positions will oversee implementation, as directed.
- Consults with regional and DFPS State Office management, regional caseworkers and field staff, CPS State Office program and policy staff, external public and private stakeholders, consumers of child protective services, volunteers, advocates, judges, other social service providers to provide FFPSA program guidance;
- Provides consultation and guidance regarding the planning, development, implementation, and monitoring of projects and programs associated with FFPSA initiatives;
- Facilitates and manages program communications with internal and external stakeholders including CPS State Office staff, field staff at all levels, staff from other state and federal agencies, providers of services for agency clients, stakeholders, and legislators;
- Continues to oversee the compilation and analysis of data and information from various program resources and stakeholders to shape goals, objectives, and priorities; and
- Facilitates completion of studies, analyses, and research regarding program strategy policies and procedures, and develops recommendations for program and agency leadership.

The FFPSA budget analyst was created and has worked to help internal and external stakeholders understand the FFPSA, state direction for a response, and the complex funding requirements associated with options under state considerations. This position has served as the finance subject matter expert to help guide implementation of financing changes related to FFPSA implementation.

## **12) Substance Use Project**

**The Substance Use Project responds to priorities (1), (2), (3), (4), (5), (8), and (13) in the Child Abuse Prevention and Treatment Act Amendments.**

There are two CPI substance use disorder specialists, supporting staff working to address the needs of families experiencing investigations or alternative response contacts. Within CPS, the positions operate within the CPS Behavioral Health Services division and consist of a division administrator and three CPS substance use disorder specialists. These staff address the needs of families receiving Family-Based Safety Services (FBSS) or who have a child in DFPS conservatorship. The substance use disorder specialists are housed in different parts of the state and cover all regions.

The substance use disorder specialists provide support, resources, and technical assistance to direct delivery staff in their work with families experiencing substance use disorders through every stage of service.

During the past year, the two CPI specialists and three CPS specialists provided training and support related to substance use disorders and substance use treatment to DFPS field staff, leadership, and stakeholders. The substance use disorder specialists worked with DFPS regional staff and stakeholders to strengthen compliance with federal Plans of

Safe Care requirements.

The following interagency personnel finalized the work for improving Plans of Safe Care:

- HHSC staff, including the associate commissioner for behavioral health services, substance use disorder programs director, substance use disorder medical director, Texas Targeted Opioid Response director, and substance use disorder manager; and
- DFPS staff, including the associate commissioner for CPS, CPS medical director, CPS director of services, CPI division administrator, and CPS behavioral health services division administrator.

The Plan of Safe Care was implemented during the past year and designed to improve services to families involved with DFPS due to substance use issues. An emphasis is placed on collaborative efforts to improve current plans of safe care standards, ensure coordinated service delivery, and enhance communication between DFPS and agencies providing treatment or other support services, related to substance use treatment. A Plan of Safe Care toolkit provides direction to providers, agencies, and programs to assist with implementation.

All substance use disorder specialists, the Behavioral Health Services division administrator, and the CPS medical director will participate in the annual Neonatal Abstinence Syndrome Symposium.

The CPS and CPI substance use program specialists participates in monthly collaborative meetings with HHSC and statewide Outreach, Screening, Assessment and Referral (OSAR) service agencies to strengthen and improve communication that ensures access to coordinated service delivery or other support services, related to substance use treatment.

CPS substance abuse disorder specialists participate in a FFPSA interagency workgroup with the goal of increasing access of inpatient substance use services for mothers with their children and collaborate with the CPS mental health program specialists to develop a training for parent collaboration groups to assist parents in recognizing and responding to mental health crisis in youth.

CPS and CPI substance abuse disorder specialists are participating in the development of resources and information for statewide initiatives for both Fentanyl awareness and safety, and medication assisted substance use treatment.

CPS substance abuse disorder specialists are participating in a workgroup with HHSC to plan a statewide conference for the Behavioral Health Institute. The conference will promote the integration of the behavioral health systems for mental health, substance use disorders, recovery, intellectual and developmental disabilities, and behavioral health and primary care.

The CPI and CPS substance use disorder specialists participated in regional meetings with direct delivery staff providing presentations for knowledge development and consistency in regional support which include:

- Responding to questions related to substance use, various drug testing methods, and treatment programs statewide;
- Presenting on topics related to substance use disorder, resources, and access to services, including two DFPS leadership conferences;
- Providing training to staff and community stakeholders about substance use disorders, plans of safe care, family engagement, and available resources;
- Participating in child and family service planning activities and identifying needed services for families involved with child welfare; and
- Facilitating communication with DFPS staff and local OSARs by attending the Texas Association of Addiction Professionals monthly meetings and participating in Drug Court meetings and staffing's statewide.

### **13) Trauma-Informed Care Project**

#### **The Trauma-Informed Care Project responds to priorities (6), (7), and (13) in the Child Abuse Prevention and Treatment Act Amendments.**

One CPS trauma-informed care manager and six regional trauma-informed care specialists comprise this team in CPS Behavioral Health Services division. These staff address the needs of families receiving FBSS or who have a child in DFPS conservatorship. The team is housed in different regions of the state. Trauma-informed care specialists provide support, resources, and technical assistance to direct delivery staff in their work with families experiencing trauma and trauma-related behavioral health issues through every stage of service.

The trauma-informed care team participated in regional meetings with direct delivery staff providing presentations addressing:

- The importance of Trauma-Informed Care service delivery;
- The impact of adverse childhood experiences and appropriate resources for such; and
- The impact of secondary traumatic stress and the importance of appropriate self-care and case-specific staffing related to complex trauma history and/or needs.

The trauma-informed care specialists support staff through providing a trauma-informed lens to critical meetings through the life of a case, including family group conferences, permanency conferences, hospital discharge staffing's, and other important meetings.

In fiscal year 2023, the trauma-informed care team has targeted focus on kinship. Specialists offer direct support to kinship caregivers through the creation of support materials on needed topics, training on trauma-informed topics, connection with trauma-informed community services, and practical support in trauma-informed parenting practices. Trauma-informed care specialists collaborate with kinship development staff in their work to maintain and strengthen kinship placements in the best interest of children.

## **A. Descriptions, Accomplishments and Proposal of Projects/Initiatives Using CAPTA Funds (FY 2024 Proposals)**

Listed below is an outline of activities that the state intends to carry out with State Grants funds received during FY 2023 pursuant to section 106(b)(2) of CAPTA:

### **1) Evaluation of CPS Best Practice Initiatives**

**The Evaluation of CPS Best Practice Initiatives responds to priorities (1), (4), and (7) in the Child Abuse Prevention and Treatment Act Amendments.**

The DFPS Office of Data and Systems Improvement's (ODSI) mission is to build an infrastructure and environment that ensures effective coordination, communication, and consistency across DFPS around data reporting and usage in understanding and improving performance and outcomes. ODSI helps ensure DFPS uses data to continuously and proactively identify and address areas of concern and build on areas of strength to better fulfill our mission of protecting the unprotected. The ODSI Analytics and Evaluation team project supports this mission by working with DFPS State Office and field staff to improve outcomes related to achievement of safety, permanency, and well-being for children. The team provides strategic guidance on and creates processes, tools, and reports to improve decision making and child safety, uses analytics to target high risk populations, analyzes statewide program patterns and trends and evaluates new program initiatives.

### **Goal and Objectives**

The goal of the Analytics and Evaluation team is to help DFPS improve outcomes for children and families impacted by abuse and neglect resulting in a need for DFPS services.

### **Approach**

The Analytics and Evaluation Team will provide in-house consultation or technical assistance by:

- Assisting with development of critical thinking skills;
- Expanding continuous quality improvement principles throughout the different stages of service;
- Providing customer support in the areas of planning, analysis, and evaluation;
- Providing strategic guidance on and creating processes, tools, and reports to improve decision-making and child safety, including strategic FFPSA planning and decision-making;
- Using analytics to target high risk populations;
- Analyzing statewide program patterns and trends;
- Evaluating new program initiatives, such as Community Based Care; and
- Evaluating impact of federal legislation, such as FFPSA.

The project will continue to enhance data analysis and monitoring, root cause analyses, and supporting leadership in crafting and implementing plans for improving the functioning of processes and practices related to child abuse and neglect.

**Budget**

A total of seven full time equivalent (FTEs) positions are requested:

- Five Research Vs;
- One Manager IV; and
- One MRS Ad Hoc Systems Analyst V.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$496,334.00
L1002	Other Personnel Costs	\$2,742.00
L2009S	Other Operating Expenses Salary	\$4,963.00
FRINGE		\$168,754.00
OVERHEAD		\$83,006.00
IT COSTS		\$28,761.00
L2005	Travel	\$23,695.00
L2005M	Travel Mileage	\$1,645.00
<b>Subtotal for 7 FTEs</b>		<b>\$809,900.00</b>
Equipment for databases and licenses (additional L2009)		\$50,000.00
<b>Total</b>		<b>\$859,900.00</b>

**2) Disproportionality**

**The Disproportionality Program responds to priorities (3) and (11) of the Child Abuse Prevention and Treatment Act amendments.**

The Disproportionality Program identified the need for increased sensitivity with CPS and CPI staff in working collaboratively with families of all races and ethnicities. The purpose of this project is to address the systemic factors and identify practice improvements to address the statewide disproportionate representation and disparate outcomes for African American and Native American children and their families within the Texas child welfare system, as well as Hispanic children and their families in some areas of the state.

## **Goals and Objectives**

Issues surrounding the disproportionate rate at which such children enter the DFPS system, the equity with which children of color and their families are provided access to available services, and the disproportionate and disparate outcomes for African-American and Native American children, as well as Hispanic children in specified regions, once they are engaged in the child welfare system (including all phases of service) will continue to be examined in an effort to promote equity and improve outcomes for all children and families.

## **Approach**

The project approach is to respond to disparities in the child welfare system by examining data at the county, regional, and state levels. Using this data, DFPS will develop strategic plans at the regional and state level to address disparities. DFPS will continue use the data and information learned about disparities to collaborate with community disproportionality committees and other external stakeholders. DFPS and its partners focuses on improving practices for youth and families with historically less favorable outcomes also supports improved outcomes for all Texas families throughout child welfare.

Work efforts for addressing disproportionality and disparities among Native American children in the system, as well as issues related to the federal Indian Child Welfare Act continue through work with the Children's Commission and the three federally recognized Tribes in Texas.

A disproportionality manager and a disproportionality specialists' team will coordinate statewide activities; assist with the development of grants, as necessary, to support further endeavors; liaise with program evaluation staff; attend, develop, and deliver training and technical assistance as identified; and engage community partners in the process of understanding local disproportionality data and issue identification.

Efforts will identify and strengthen opportunities to weave DFPS disproportionality work into every aspect of program, policy, services, initiatives, and leadership development, as well as applications for cross-systems practice models. The community-based stakeholders at the local level will identify community resources and engage community partners and staff in joint efforts to impact disproportionality and improve outcomes for African American and Native American children and families. These community resources will focus on mitigating the circumstances that bring children into care disproportionately, while promoting cultural responsiveness among DFPS staff. By helping the child welfare culture be more responsive to families and including the parent and youth voice no matter their racial or cultural background, families will feel more empowered to express their needs and expectations and, in that process, find greater equity of service.

As contributing factors are identified, staff will actively work to both increased awareness of and control for factors creating identified disparities. Each region will test services, resources, and changes effective in lowering the rate of disproportionality to more effectively expand this work statewide and to other state agencies and institutions.

## Expected Outcomes

The expected outcomes of this project are:

- Greater responsiveness to the unique needs of all families served by DFPS;
- Individualized approaches to providing services and supports to families;
- Enhanced understanding of the dynamics that contribute to disparate outcomes for families;
- Greater awareness of individual cultural, racial, and ethnic biases that impact service delivery;
- Identification and elimination of DFPS policies and procedures that contribute to disproportionality;
- Increased community participation and development of partnerships to create and increase the provision of services that prevent children from entering foster care, and exiting to permanency at higher rates;
- Adherence to a practice model that respects the cultural, racial, and ethnic differences of families and staff that ensures equity;
- Cross-systems approach to address disproportionality to have sustainable systemic change; and
- Further strengthening a family-centered system that provides access to programs, services and supports equitably to all children and families.

In addition to the identified manager position, successful completion of this project will require funds for work in each region of the state and sustainability for state level cross-systems efforts. This includes costs for training, staff consultation, costs for stakeholder and DFPS partnerships (e.g., meeting space, facilitation), and program development.

## Budget

One Disproportionality Manager IV is requested.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$76,388.00
L1002	Other Personnel Costs	\$422.00
L2009S	Other Operating Expenses Salary	\$764.00
FRINGE		\$25,972.00
OVERHEAD		\$11,858.00
IT COSTS		\$4,226.00
L2005	Travel	\$4,537.00
L2005M	Travel Mileage	\$227.00
Subtotal for 1 FTE		\$124,394.00

Category	Description	Amount Requested
Funding for Specialized Training (L2009)		\$50,000.00
<b>Total</b>		<b>\$174,394.00</b>

### 3) Children with Disabilities Project

The Children with Disabilities Project responds to priorities (7), (9a and b) and (13) of the Child Abuse Prevention and Treatment Act Amendments.

#### Goals and Objectives

The overall goals of the project will be to:

- Ensure children with intellectual and developmental disabilities in the care of DFPS are placed in the least restrictive setting available that can meet their needs;
- Develop experts in the knowledge and coordination of intellectual and developmental disability services and resources;
- Improve the well-being of children with intellectual and developmental disabilities;
- Improve the coordination between DFPS and the HHSC Office of Guardianship regarding the guardianship referral process for children age 16 years and older with intellectual and developmental disabilities who will likely require a guardian; and
- Provide consultation and training to DFPS staff members.

Objectives related to these goals are to:

- Promote the identification of children with intellectual and developmental disabilities and assess their needs;
- Raise awareness of and improve access to services for children with intellectual and developmental disabilities, including behavioral health and auxiliary services such as vocational assistance;
- Serve as subject matter experts for children with intellectual and developmental disabilities;
- Consult and participate in child service planning activities and identifying needed wraparound services;
- Serve as aging-out guardianship coordinators for children with intellectual and developmental disabilities who require a guardian;
- Facilitate the transition of children out of facilities into least restrictive settings;
- Advocate for Medicaid waiver slots for children with intellectual and developmental disabilities and placement on appropriate Medicaid waiver interest lists;
- Facilitate Determination of Intellectual Disabilities for children with suspected intellectual and developmental disabilities through the local intellectual and developmental disability authorities (LIDDAs);
- Serve as a liaison with LIDDAs and facilitate related services, including long-term services and supports;
- Facilitate placements into Home and Community-Based Services, Intermediate Care Facilities for Individuals with Intellectual Disabilities, State Supported Living Centers,

nursing facilities, and General Residential Operations serving children with intellectual and developmental disabilities, specifically Casa Esperanza and Mission Road Development Center;

- Provide training to staff and caregivers about intellectual and developmental disabilities and available resources; and
- Participate in the formal review of guardianship decisions.

### **Approach**

The Children with Disabilities Initiative will:

- Educate DFPS staff members about Medicaid waiver programs, long-term services and supports, and eligibility requirements for children with intellectual and developmental disabilities;
- Provide consultation and training to DFPS staff members related to the needs of children with intellectual and developmental disabilities;
- Collaborate with local, state, and federal agencies and programs and caregivers who serve children with intellectual and developmental disabilities;
- Educate DFPS staff members about STAR Health resources for children with intellectual and developmental disabilities;
- Coordinate all guardianship referrals to the HHSC Office of Guardianship related to children in DFPS conservatorship with intellectual and developmental disabilities who may require a guardian;
- Assist caregivers and DPS staff members in accessing appropriate services;
- Coordinate with the HHSC Local Procedure Development and Support Unit and the LIDDAs on referrals, enrollment, and placement of children in DFPS conservatorship in specific Medicaid waiver programs; and
- Conduct training and technical assistance for DFPS staff members and caregivers related to intellectual and developmental disabilities and related conditions.

### **Expected Outcomes**

As a result of project activities:

- Children and their caregivers will have increased awareness and access to available resources and other supportive services.
- Caregivers will be better equipped to provide care for children in their own homes.
- DFPS caseworkers will be able to evaluate the needs of children with intellectual and developmental disabilities and be more successful in accessing available services.
- DFPS developmental disability specialists will be able to assist in evaluating least restrictive placement options that meet the unique needs of children with intellectual and developmental disabilities.
- Children with intellectual and developmental disabilities will experience less placement disruptions.
- Information regarding intellectual and developmental disabilities and available resources will enhance the quality of placement services and permanency planning efforts for children in substitute care, as DFPS developmental disability specialists will assist in identifying specific needs and services for children with intellectual and developmental disabilities.

## Budget

A total of nine FTEs are requested:

- One Developmental Disability Program Specialist V; and
- Eight Regional Developmental Disability Specialists.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$548,897.00
L1002	Other Personnel Costs	\$4,064.00
L2009S	Other Operating Expenses Salary	\$5,489.00
FRINGE		\$186,625.00
OVERHEAD		\$101,106.00
IT COSTS		\$37,213.00
L2005	Travel	\$5,166.00
L2005M	Travel Mileage	\$8,289.00
<b>Total for 9 FTEs</b>		<b>\$896,849.00</b>

## 4) Education Project

**The Education Project responds to priorities (3), (7), (9a and b), and (13) of the Child Abuse Prevention and Treatment Act Amendments.**

### Goals and Objectives

- Maintain an education portfolio for every school-aged child in the DFPS conservatorship to secure relevant documents for casework and improved outcomes;
- Ensure children in foster care receive appropriate grade-level placement and ancillary services to be successful in the school setting;
- Improve education outcomes for children in substitute care by exchanging aggregate data regarding children in substitute care with the Texas Education Agency, focusing on areas of special education services, high school graduation levels, disciplinary actions, attendance, grade level and other areas;
- Provide training to internal and external stakeholders on education issues relevant to children in foster care;
- Build community partnerships with schools, agencies, associations, and organizations that support the DFPS mission to protect children in foster care;
- Ensure every school-ages child and youth in foster care has a designated education decision maker who is responsible for supporting the student's educational goals and needs; and
- Identify supplemental educational opportunities and community resources for children and youth in foster care, which contribute to their social, emotional, and educational

growth.

### Approach

Ongoing and developing projects to be addressed in fiscal year 2024 include:

- Collaborate with internal and external partners on common educational issues impacting youth in DFPS conservatorship, including:
  - ▶ Earlier transition planning for youth in care, including life skills training, academic, vocational, and continuing education options;
  - ▶ Credit recovery for foster youth to obtain maximum credit requirements for high school graduation;
  - ▶ Enrollment by eligible high school students in early college start programs and dual credit programs; and
  - ▶ Encouragement for obtaining a minimum of a high school diploma for every youth in foster care, and discouragement for overuse of the completion to high school studies path to a Graduate Equivalency Diploma;
- Continue collaborative projects with stakeholders, including but not limited to Early Childhood Intervention services, the Texas Education Agency, Texas Head Start, the Children's Commission, and the Meadows Center at the University of Texas to achieve school readiness and success for children in foster care;
- Work with Texas Education Agency and the Children's Commission to update the *Foster Care and Education Success Resource Guide*;
- Strengthen the process for ensuring the person authorized to make educational decisions for children in conservatorship is identified; and
- Develop cross collaboration between DFPS regional education and developmental disability specialists in identifying and delivering services to school-aged children with special needs in DFPS conservatorship.

The project also funds a separate regional education specialist to oversee the educational needs for the children in Region 01 which covers a large portion of the Texas Panhandle. This allowed the regional education specialist for Region 02 to provide oversight and services to the smaller, more isolated school districts in West Texas. There are currently 12 regional education specialists throughout Texas: 2 education specialists in the larger metro areas of the Dallas-Fort Worth Metroplex and 2 in the Houston area. This proposal includes sustaining the support for that position.

### Budget

A total of two FTEs are requested:

- One Education Program Specialist V; and
- One Regional Education Program Specialist.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$129,368.00
L1002	Other Personnel Costs	\$1,027.00

Category	Description	Amount Requested
L2009S	Other Operating Expenses Salary	\$1,294.00
FRINGE		\$ 43,985.00
OVERHEAD		\$23,014.00
IT COSTS		\$7,631.00
L2005	Travel	\$1,800.00
L2005M	Travel Mileage	\$664.00
<b>Total for 2 FTEs</b>		<b>\$208,783.00</b>

**5) Texas Council of Child Welfare Boards**  
**The Texas Council of Child Welfare Boards responds to priority (11) in the Child Abuse Prevention and Treatment Act amendments.**

The Council is a statewide organization comprised of volunteer representatives from the local and regional child welfare boards with the purpose of providing leadership through a comprehensive, cohesive network of child welfare boards to support services to vulnerable children and promote the prevention of child abuse or neglect, so all children live in a loving, nurturing, and safe environment.

The Council represents grass-roots child welfare boards through its assembly of representatives from all 11 regional child welfare board councils in Texas which are composed of delegates from most of those local child welfare boards appointed by their respective county commissioners' courts. Council officers and members advocate for children through encouraging legislation to improve services to abused or neglected children and prevent child abuse; working with DFPS staff on programs to meet these children's needs; and networking with other agencies and organizations to provide the best care for abused or neglected children, while at the same time striving to prevent such abuse and neglect through public awareness and coalitions with other community service providers.

**Goals and Objectives**

The Council goals include the following:

- Provide technical assistance to local and regional child welfare boards regarding local, regional, and state child welfare board potentials that promote public and private partnerships in their respective communities, as well as attracting national partners;
- Develop an electronic training module for local child welfare boards that enhance child and family well-being outcomes through education and training on DFPS services, particularly in the areas of education, disability services, mental health and outsourcing of foster care and case management;
- Analyze resources developed by local child welfare boards and used for ~~partn~~ and

intervention services to identify gaps in services for public and private sectors and address these gaps to increase the amount and quality of services available for child abuse and neglect;

- Fund a portion of an executive director's salary for the Council to continue to coordinate data distribution and maintain progress in facilitating the vision and operations of the Council;
- Fund the development of a comprehensive, updated Council operations, policy manual, and training resources available to regional councils and local child welfare boards; and
- Fund a statewide educational conference available to all child welfare boards, CPS staff, and child volunteers across Texas.

### **Approach**

The Council meets in person biannually to develop statewide programs that advocate for child abuse prevention and services. Other council and committee meetings are now held by teleconference. The Council has five standing committees: education, advocacy, resource development and awards and Fostering Brighter Futures. There are also special committees, or ad hoc committees, appointed by the President of the Council. The Council is a recognized 501(c)(3) non-profit Texas corporation.

The executive director's duties are to:

- Utilize the local, regional, and state child welfare board organizational model to promote public/private partnerships;
- Provide technical assistance, direction, and guidance to local and regional child welfare boards to effectively develop their organizations;
- Analyze resources developed by local child welfare boards and used for prevention and intervention services, using the statewide inventory system;
- Implement the models and methods developed to leverage and grow resources from both the public and private sectors to increase the amount and quality of services available to address child abuse and neglect locally and statewide;
- Oversee the training of Council and local child welfare board members utilizing standardized policy and operations manuals and electronic training modules;
- Coordinate, plan, and provide at least one training opportunity available to all child welfare board staff and volunteers across Texas;
- Annually coordinate at least two meetings of the full council and one special or planning meeting of the executive committee to provide education, direction, and guidance to the membership; and
- Develop independent, consistent funding streams to operate the Council and fund its service, education, and prevention projects.

### **Expected Outcomes**

The collaboration and cooperation from child welfare boards is expected to increase resources available to address child abuse and neglect due to new public and private partnerships developed by the boards.

Accountability of local assistance from the state, regional, and local collaborations will be improved due to accurate collection of data regarding funding and expenditures. As the

Council leadership continues to implement its five-year strategic plan, children and families will have access to a variety of services at the local level; CPS caseworkers will experience greater community support; and child abuse prevention efforts will be expanded statewide.

The Council has adopted and solidified under the umbrella Texas Network of Youth Services with Fostering Brighter Futures, a state-wide effort to recruit additional foster and adoptive parents for the children of Texas. This is a major initiative for the Council currently and for the future.

**Budget**

No FTEs are requested.

Description	Amount Requested
Partial funding of Texas Council of Child Welfare Boards Executive Director (L2001)	\$25,608.00
<b>Total</b>	<b>\$25,608.00</b>

**6) Parent Collaboration Group**

**The Parent Collaboration Group responds to priority (3) in the Child Abuse Prevention and Treatment Act Amendments.**

**Goals and Objectives**

The Parent Collaboration Group Project goals are to:

- Identify service gaps to families and children;
- Identify effective services that should continue;
- Identify areas of policy needing improvement;
- Provide an avenue for parents to recommend policy changes;
- Identify ways parents can be instrumental in improving a caseworker’s skills in relating to parents;
- Facilitate parent volunteer participation in at least three statewide meetings by removing barriers associated with travel, per diem, and childcare expenses;
- Provide resources, direction, and guidance at the regional meetings to effectively expand and sustain regional Parent Support Groups;
- Improve policy and practices related to engagement of fathers; and
- Provide deliverables to staff and parent liaisons that inform parent liaisons and strengthen placement stability.

The objectives of the Parent Collaboration Group include the following:

- Elevate the value of parents’ voices and parental engagement to staff;
- Increase father involvement;
- Increase parent participation in regional Parent Support Groups;
- Provide focused input on investigations, FBSS, and foster care; and
- Improve services for children and families through implementing policy changes

recommended by parents.

### **Approach**

The Parent Collaboration Group model is one in which DFPS staff partner with a statewide parent liaison and/or regional parent liaisons to enhance services and communication between DFPS and families who receive DFPS services. The Parent Collaboration Group model provides co-leadership with a staff person from the DFPS State Office and a parent who is a former recipient of DFPS services. CPS regional management selects regional CPS staff and parent liaison representatives for the statewide Parent Collaboration Group. These groups continue to be nurtured and sustained.

The statewide Parent Collaboration Group will meet up to three times a year, and regional Parent Support Groups will continue to meet once a month, but no less than quarterly, according to local needs and resources. Statewide Parent Collaboration Group participants will engage in discussion of practices relevant to the DFPS system. Parent representatives will identify those practices that work effectively and those that are problematic or need improvement. They will develop recommendations for enhancement to the current delivery system. The CPS parent program specialist will provide feedback and recommendations from the statewide Parent Collaboration Group members to DFPS management and program specialists regarding service gaps and casework practices that need improvement.

In fiscal year 2024, the plan is to strengthen the voice of the statewide Parent Collaboration Group, provide support and technical assistance to all regions, and obtain input from parents regarding how to improve safety, well-being, and permanency for children receiving DFPS services, as well as meaningful engagement of parents and families. The project requested an increase for reimbursements to parents, due to increased cost of living.

Activities will include:

- Educate other constituent groups about parent issues/voice (e.g., foster parents, judges, Prevention and Early Intervention [PEI], and CASA);
- Continue to provide trainings to staff from a parental perspective;
- Continue the expansion of the regional Parent Support Groups in rural areas to assist parents in understanding DFPS processes and enhance the partnership between parents and DFPS;
- Fill parent liaison vacancies at the statewide Parent Collaboration Group Advisory Committee;
- Institute parent liaison training for new members of the Parent Collaboration Group Advisory Committee;
- Increase the number of parent liaisons, emphasizing participation by more fathers;
- Revise *Child Protective Services from a Parent's Perspective* video for new employees;
- Increase community outreach and regional awareness of the Parent Support Groups;
- Provide parent liaison incentives; and
- Enhance the Parent Collaboration Group training and exposure to key community

stakeholders.

### **Expected Outcomes**

The expected outcomes for this project include:

- Improved cooperation and collaboration between parents and DFPS;
- Enhanced ability for DFPS staff to work effectively with families;
- Increased father involvement in DFPS activities, especially those of decision making and case planning;
- Improved services that meet the individual needs of the families; and
- Improved safety, permanency, and well-being outcomes for children.

### **Budget**

No FTEs are requested. The funding will be used to support three statewide meetings. The state Parent Collaboration Group operating budget for fiscal year 2024 is based on 22 parent liaisons and 15 DFPS liaisons attending three state meetings. The DFPS parent program specialist will provide technical assistance in the regions related to Parent Support Groups. The proposed budget is calculated at an attendance rate of at least two parents per region and one CPS liaison per region and uses standard, approved state rates for travel costs.

Category	Description	Amount Requested
L2005	Travel	\$59,157.00
L2009	Other Operating Expenses	\$10,106.00
L3001	Client Services	\$70,457.00
L2001	Professional Fees & Services	\$31,323.00
L2006	Rent – Building	\$6,215.00
<b>Total</b>		<b>\$177,258.00</b>

### **7) CPI) Best Practices**

The CPI Best Practice Initiative responds to priorities (1), (2), (4), (7), and (13) of the Child Abuse Prevention and Treatment Act amendments.

#### **Goals and Objectives**

The primary goal for the CPI Best Practice project is to identify and promulgate intake and investigation best practice models for the Texas child welfare system throughout the state to assist with the cultural shift within DFPS necessary and better achieve safety of children and families. CPI Best Practice is focused on improving work in abuse and neglect investigations.

The CAPTA-funded positions will provide leadership for strategies that support improving

safety outcomes with children and families involved in child abuse and neglect investigations.

## **Approach**

There will be several management staff in this project.

Key management positions provide vision and focus on best practices relating to quality investigations, child safety, and leadership development. These positions will collaborate to streamline processes and establish practice consistency across the CPI division.

- A CPI deputy director position will provide direction and oversight to enhancing policy and practice. The position will assist in strengthening the analysis of risk and safety reviews of investigations and supervise the risk managers and child safety specialists statewide, to better identify trends and needs and strengthen best practices.
- A lead child fatality specialist assigned to the DFPS Office of Accountability ensures reviews of investigations of child fatalities and near child fatalities to strengthen practice and staff understanding of trends and data.
- Three new CPI mentor specialists will strengthen the DFPS Mentor Initiative and ensure best practices are integrated into casework protocol and practice.
- The CPI division administrator for investigations and alternative response will continue implementing and strengthening the Alternative Response program as it is embedded into practice, as well as manage IT changes necessary to support these practice changes. Efforts are underway to maintain practice standards and assess needs of the program for sustainability.
- The CPI division administrator of best practice will continue to be involved and make decisions regarding policy and practice changes, as well as the implementation of those changes throughout the state. This position will manage the two behavioral health and two substance use specialists attached to the Substance Use Project described below; and the master investigator program director. These specialists will continue to partner with one another and the regions to support the field in practice and policy changes.
- The CPI director of leadership and staff development is a new position that will manage one best practice and one behavior health specialist, as well as the generalist position. These positions will partner with one another to provide staff and leadership opportunities while focusing on their subject matter expertise. These positions will liaise with CLOE; however, they will provide training opportunities specific to each region. The CPI director of leadership and staff development will continue to focus on ensuring staff and leadership development opportunities are provided to employees at all levels to improve their skill set and empower growth through training, workshops, and identified enrichment opportunities. The CPI director of leadership and staff development will be responsible for the delivery of the monthly internal Meeting in a Box for the upcoming fiscal year, since this area will be responsible for all training related to the field. This director will liaise with other CPI programs to ensure training opportunities are developed and provided to assist staff in all specialized areas, such as special investigations and human trafficking.
- Subject matter experts in the areas of safety and risk, coaching, mental health, and

training support best practices by providing consultations, developing, and delivering training, and researching and providing access to nationally recognized best practices.

- ▶ Two CPI behavioral health program specialists will continue to serve as the statewide subject matter experts for behavioral health issues of children related to the investigation stage of service. Opportunities for diverting children and youth from entering DFPS conservatorship due to an inability to access appropriate behavioral health services is the primary emphasis. For the upcoming fiscal year, behavior health program specialists will focus on efforts to educate and inform staff as they make decisions related to the safety of children and families and work with stakeholders to identify appropriate resources for the population being served.
- ▶ The CPI best practice program specialists will serve as the subject matter experts for safety and risk assessment across CPI and work to improve the overall quality of investigations through sound decisions around child safety and future risk. The position will be responsible for providing guidance, direction, and training, as needed to further develop critical thinking skills of investigators and supervisors. During the next year, this staff will work with investigations field staff on strengthening the protective capacities of families and ensuring staff get the appropriate services that will meet their family’s needs.
- ▶ Three generalist program specialists will provide project management for strategies as needed to support the overall operations of CPI. Case review or other quality assurance activities will be used to help identify trends. Strategies can include policy review and coordination of feedback from field, working closely with our state office team to package information around policy, protocol, or practice changes to regional staff, and serving to represent field staff on interagency or interdivision committee work.

**Budget**

A total of 14 FTEs are requested:

- One CPI Director III;
- One Director I;
- Two Manager IVs;
- One Lead Child Fatality Specialist in Accountability;
- Two Behavioral (Mental) Health Program Specialist VIs;
- Three Best Practice Generalist Program Specialist VIs;
- One Alternative Response Program Specialist VI; and
- Three Mentor Specialist VIs.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$1,049,847.00
L1002	Other Personnel Costs	\$6,909.00
L2009S	Other Operating Expenses Salary	\$10,498.00
FRINGE		\$356,948.00

Category	Description	Amount Requested
OVERHEAD		\$166,012.00
IT COSTS		\$56,701.00
L2005	Travel	\$74,088.00
L2005M	Travel Mileage	\$9,646.00
<b>Subtotal for 14 FTEs</b>		<b>\$1,730,650.00</b>
Media campaign for abuse and runaway youth hotlines (L2001)		\$175,000.00
CPI Best Practice specialized training		\$50,000.00
<b>Total</b>		<b>\$1,955,650.00</b>

### 8) CPS Best Practices

The CPS Best Practice Initiative responds to priorities (3), (7), (9), (12), (13), and (14) of the Child Abuse Prevention and Treatment Act amendments.

#### Goals and Objectives

The primary goal for the CPS Best Practice project is to identify and promulgate best practice models for the Texas child welfare system throughout the state to assist with the cultural shift within DFPS necessary better achieve safety, permanency, and well-being of children and families experiencing ongoing CPS services.

The positions in this project will provide leadership for strategies contained within the Round 3 Program Improvement Plan that, although the plan was successfully completed, addresses areas CPS continues to work to improve to strengthen safety, permanency and well-being and moves toward substantial conformity in the next federal Child and Family Services Review for Texas. The positions will also assist in addressing areas identified in more recent data profiles and from case reviews, as well as help make changes related to statutory guidance and direction. Including both outcomes and systemic factors, these key areas need improvement: transition from investigation to FBSS stages of service; a need for better family engagement in case planning, especially fathers, in FBSS and conservatorship stages; reduction of permanency barriers; strengthened support for youth with lived experience as they prepare for permanency; strengthened support for entry into adulthood in the areas of housing and employment; placement stability; and enhanced placement resources for children and youth with complex needs.

Emphasis will be on systemic improvement to ensure improved outcomes are developed statewide and sustained. Leadership and statewide training, external training, and staff development will be used.

### **Approach**

To infuse changes and sustain improvements, several modalities were added to achieve a more systemic impact supporting best practices and practice improvement. These include:

- Subject matter expert positions will continue in the following subject matter areas: domestic violence, parent engagement, fatherhood engagement, placement practice (two positions), positive permanency, medical services, and ICPC (two positions). These positions guide CPS practice improvement work and ensure training needs are addressed in a manner that helps embed improvement strategies in direct delivery work. By partnering with other CPS and CPI program specialists, these positions focus on the development of protocols and policy that will ensure the CPS Practice Model drives decisions and actions at all CPS levels and stages. These positions also refocus the work as more of the conservatorship direct delivery is contracted out through Community-Based Care.
- Four division administrator positions will supervise the development of protocols and policy aimed to sustain system improvements as identified from specialty case reviews under the direction of the CPS director of field, support best practices, and oversee program practice improvement initiatives in the areas of FBSS, manage specialty staff (i.e., clinical coordinators) focused on children with the most complex needs for whom placement and services prove to be the most difficult, and training and mentoring to truly integrate practice changes statewide.
- Two Director I positions will supervise ongoing best practice in the areas of permanency and well-being services. Well-being is focused particularly on medical and behavioral health needs for children in conservatorship.
- CPS regional directors and program administrators will have a statewide conference dedicated to leadership development. A leadership retreat with mid- to senior-level management will focus on the importance of engagement and relationship building, providing creative and innovative ideas and opportunities for connection during the conference and beyond. Initiating this conversation with leadership and providing them with the tools and techniques to affect real connection, CPS hopes to promote parallel processing, where front line staff will use similar methods with the children and families they encounter in their daily interactions. The retreat participants will include CPS and Community-Based Care leadership with the ultimate goal of providing staff with the knowledge and skill to affect collaborative interactions at all levels.
- In partnership with AdoptUSKids, training and skill development will be used to increase opportunities for youth available for adoption by creating a brief video using their own talents, words, interests for use in the recruitment process. The Texas Adoption Resource Exchange (TARE) redesign is currently underway, and discussions are being had to address the necessary steps, website, and system updates necessary to add additional uploading and viewing options via iPhone and other mobile devices.

- This project will also include a dedicated budget to support a recommendation made by youth and adults with lived experiences in DFPS conservatorship. These young adults have identified a mechanism for safe and sustainable storage of identification documents each youth departing conservatorship after age 16 years is entitled to receive. Examples of these documents include copies of birth certificates, the Health Passport, education records, and others. The Youth Leadership Council has designed two alternatives for safe, sustainable, and confidential flash drive storage in two forms: a wrist bracelet and a credit-card sized card that can slip into a wallet. Youth and young adults designed the appearance of both. This project proposes a budget to purchase a sufficient number for youth aging-out of care or exiting as an older youth. Additionally, some of this funding will be used to fund state ID cards for youth who do not obtain a driver's license. Sufficient identification was identified as key from the youth.
- A position focused on housing was added to the Transitional Living Services team which assists communities in improving access to safe, affordable housing with support to reach self-sufficiency and attainment of education and employment goals. The U.S. Department of Housing and Urban Development (HUD)'s Foster Youth to Independence initiative provides housing assistance and supportive services to young people with a child welfare history who are at-risk-of or experiencing homelessness. The work will guide regional partnership with local housing authorities and other community partners to secure housing vouchers, services and supports to assist the young adult in maintaining their voucher and housing for three years, the life of the voucher.
- A Transitional Living Services team lead position will focus on employment initiatives and programs, including providing expertise and support in areas of internship experience and employment for older youth and young adults. The focus will include expansion of internship and part-time work options for youth in conservatorship, increased skill and knowledge for supporting youth in preparation for application, interview, and employment. Partnerships with local workforce development boards will be strengthened to enhance employment options for young adults who have lived experience. This position will also be the program lead for contracted services administering the Education and Training Voucher program which helps eligible youth increase employment opportunities through supporting their post-secondary educational progress and attainment. Position will work to help mentor other team members.
- A behavioral health specialist lead and two mental health program specialists work as part of the CPS Behavioral Health division to strengthen protocol and practice for getting needs met for children and youth with high acuity needs or dual medical and behavioral health needs requiring specialized services. These positions will support direct delivery staff, whether legacy or Community-Based Care, and access specialized service to help reduce the impact of trauma.
- Resources to support Mental Health First Aide and Motivational Interviewing trainings for CPS staff working with youth challenged with the impact of trauma and complex behavioral health needs will be supported.
- Resources with a specialized skill set to analyze models of residential or behavioral health services and/or to facilitate provider input to ensure the use of an evidence-based, trauma-informed approach in model and practice development will be

purchased.

- A federal/state support services program specialist will support foster care billing, Title IV-E foster care reviews, IMPACT eligibility functionality testing, and the Federal/State Support division’s Supplemental Security Income and adoption assistance subject matter experts. Supplies for collaborative conferences and external communications will be used, such as space, materials and speakers for conferences, booth supplies, fliers, website development, and other tools.
- All CPS local permanency specialists will have a statewide meeting to emphasize practice and quality casework, including documentation.
- Additional CLOE four staff will manage an external Learning Management System which will track completion of trainings for new practice initiatives with a target audience of external stakeholders, such as foster parents or other residential caregivers. Staff include two system administrators (Systems Analyst IV and Systems Analyst V) to perform back and front end tasks, such as run queries to produce reports or customize application or plug ins, perform course settings, and customize settings; a registrar (Systems Support Specialist III) to provide users with information around scheduling, registration and records and serve as the single point-of-contact for users with administration issues; and a Tier 2 support specialist (Staff Services Officer V) to provide user supports around quiz attempts, troubleshooting, course resets and other technical issues.
- Two mentor specialists will be used to strengthen the mentor program and ensure the integration of best practice methods into protocol and practice.

**Budget**

A total of 27 FTEs is requested:

- Four Manager IVs (i.e., FBSS, training and mentoring, clinical coordinators, and field operations);
- Nine Best Practice Program Specialist Vs (i.e., medical, domestic violence, permanency, placement, fatherhood, mental health, parent, and transitional living);
- Three Program Specialist Lead VIs (i.e., Transitional Living program, mental health, and placement);
- Two Director Is (i.e., permanency and well-being);
- Two ICPC Program Specialist IVs;
- One Systems Analyst V;
- One Systems Analyst IV;
- One Systems Support Specialist III;
- One Staff Services Officer V;
- Two Mentor Specialist VIs; and
- One Program Specialist III.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$1,797,520.00
L1002	Other Personnel Costs	\$12,708.00

Category	Description	Amount Requested
L2009S	Other Operating Expenses Salary	\$17,975.00
FRINGE		\$611,157.00
OVERHEAD		\$320,166.00
IT COSTS		\$112,460.00
L2005	Travel	\$53,940.00
L2005M	Travel Mileage	\$6,075.00
<b>Subtotal for 27 FTEs</b>		<b>\$2,932,001.00</b>
Leadership Development Facilitation (L2009)		\$25,000.00
Conference for Local Permanency Specialists (L2009)		\$25,000.00
Purchase of flash drive bracelets and state IDs for older youth (L3001)		\$50,000.00
Training resources for Motivational Interviewing and Youth Mental Health First Aide and other targeted special trainings		\$25,000.00
Resources for placement and services model technical assistance		\$201,144.00
<b>Total</b>		<b>\$3,258,145.00</b>

## **9) Community-Based Care responds to priorities (3), (11), and (13) of the Child Abuse Prevention and Treatment Act amendments.**

The Texas Legislature directed DFPS and OCBCT to implement a Community-Based Care model which changes the manner DFPS and OCBCT procures, contracts, and pays for foster care and other purchased services.

In May 2018, DFPS awarded a contract to 2INgage, a partnership between Texas Family Initiative, LLC, and New Horizons Ranch and Center, Inc., to serve as the SSCC for the Texoma and Big Country area, formerly DFPS Region 02. On June 1, 2020, DFPS transitioned case management and other Stage II services to 2INgage.

In June 2019, DFPS awarded a contract to St. Francis Community Services to serve as the SSCC for the Panhandle area, formerly DFPS Region 01. Stage II began on March 2, 2022.

DFPS renewed its existing contract with OCOK, a division of ACH Child and Family Services, in the Metroplex West area, formerly DFPS Region 03b, on September 1, 2018, to include all Community-Based Care services. DFPS transitioned case management and other Stage II services in the Metroplex West area on March 1, 2020.

In April 2021, DFPS awarded a SSCC contract to Belong, a division of St. Jude's Ranch for Children-Texas Region, Inc., dba SJRC Texas, in the South Central and Hill Country area, formerly DFPS Region 08b. Belong began Stage I in October 2021 and Stage II October 2022. On February 23, 2023, DFPS awarded a contract to EMPOWER, a collaborative of Texas Family Initiative, The Bair Foundation, Jonathan's Place, Pathways Youth and Family Services, and CK Family Services, to serve as the SSCC for the Metroplex East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On February 23, 2023, DFPS awarded a contract to 4Kids4Families, a division of Arrow Child and Family Ministries, to serve as the SSCC for the Piney Woods community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On March 15, 2023, DFPS awarded a contract to Texas Family Care Network, a division of Pressley Ridge, to serve as the SSCC for the Deep East community. Implementation of Stage I is anticipated, based on readiness certification, to begin in Fall 2023.

On March 23, 2023, DFPS and OCBCT posed a request for applications for the entire Metroplex West community, including all 10 counties in the area. This application closed on April 20, 2023, with anticipated contract start date of September 1, 2023.

Evaluation of Community-Based Care will continue in each catchment area and include analysis of performance measures, surveys on collaboration, and a process evaluation of the transition to each stage in each catchment.

The proposed budget will be used to:

- Improve automation to support implementation of the new model; and
- Fund positions to support:
  - ▶ Enhanced fiscal oversight and monitoring of the contractor;
  - ▶ Performance and evaluation of the Community-Based Care foster care model;
  - ▶ 10 enumerated duties of the OCBCT within Senate Bill 1896, 87th Legislature, Regular Session, 2021.

**Budget**

A total of one and one-half FTE is requested to support fiscal monitoring and oversight as well as SSCC performance and evaluation.

- One Budget Analyst; and
- One-half time Program Specialist VI.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$121,361.00
L1002	Other Personnel Costs	\$607.00
L2009S	Other Operating Expenses Salary	\$1,214.00
FRINGE		\$41,263.00
OVERHEAD		\$17,788.00
IT COSTS		\$5,519.00
L2005	Travel	\$1,934.00
L2001	Professional Fees and Services	\$164,637.00
<b>Subtotal for 2 FTEs</b>		<b>\$354,322.00</b>
Enhancements to Statewide Automated Child Welfare Information System (L2009)		\$140,000.00
SSCC Statewide Conference (L2009)		\$50,000.00
<b>Total</b>		<b>\$544,322.00</b>

**10) Kinship Project**

**The Kinship Project responds to priorities (3) and (14) in the Child Abuse Prevention and Treatment Act Amendments.**

## **Goals and Objectives**

The Kinship Project goals are to:

- Identify service gaps to kinship caregivers and children, including increased financial and concrete supports needed to develop and sustain kinship placements;
- Identify the services effective services that should continue;
- Identify areas of policy that need improvement;
- Provide an avenue for kinship caregivers to recommend policy changes;
- Identify ways kinship caregivers can be instrumental in improving a caseworker's skills in relating to kinship caregivers;
- Facilitate kinship caregiver volunteer participation in at least three statewide meetings by removing barriers associated with travel, per diem, and childcare expenses;
- Provide resources, direction, and guidance to the regional meetings to effectively expand and sustain regional Kinship Support Groups;
- Provide deliverables to staff and kinship caregivers to inform caregivers and strengthen placement stability;
- Support the disproportionality efforts at the regional and state level; and
- Improve policy and practices related to engagement of kinship caregivers.

The objectives of the Kinship Project include the following:

- Provide stakeholder feedback to CPS to enhance child welfare services;
- Develop structure for DFPS and kinship caregiver partnerships in policy and practice components that will become a vital element of local, state, and regional operations;
- Distribute the message to the staff and kinship caregivers regarding the value of a family voice;
- Improve the skills, qualifications, and availability of individuals providing services to children and kinship families;
- Increase kinship caregiver involvement;
- Maintain and sustain the Kinship Collaboration Group Advisory Model throughout the state; and
- Provide a link between CPS staff and kinship caregivers.

## **Approach**

The Kinship Project emphasizes partnership to enhance services and communication between DFPS and families who receive DFPS services. The Kinship Collaboration Group is led by kinship caregivers who are former recipients of CPS kinship services and supported by CPS State Office which works with regional staff to select kinship caregiver representatives for the state Kinship Collaboration Group.

The CPS kinship program specialists coordinate the statewide Kinship Collaboration Group, responsible for full coordination of quarterly meetings, submitting travel reimbursement forms for payment of expenses, travel, meals, and childcare. These kinship program specialists provide technical assistance and support for regional Kinship Support Group activities as well as building relationships with community-based partners who work with kinship caregivers involved with CPS.

A kinship program specialist was added to the project, combining with an existing kinship specialist and will further improve practice and protocol for exits to positive permanency with a relative or other kinship caregiver. This position aids in providing ongoing support and technical assistance to the regions by providing a renewed emphasis for encouraging kinship caregivers to obtain verification as foster parents, including those caregivers who wish to access Permanency Care Assistance and speed up the permanency process when Permanency Care Assistance or adoption is in the best interest of a child.

Kinship caregivers involved in the DFPS system frequently come from low-income or middle-income families and are unable to afford travel and daycare expenses to attend statewide meetings. To facilitate kinship caregiver participation in statewide meetings, DFPS will work to remove barriers preventing kinship caregivers from attending the meetings. To accomplish this once in-person meetings resume, CAPTA funding will be used to provide travel, meals, daycare expenses and mileage to caregiver participants who attend and perform public speaking and training at events arranged by the CPS kinship program specialist. An increased amount was added to compensate caregivers for additional travel costs

Under the direction of the CPS associate director for permanency, the kinship program specialists and the Kinship Collaboration Group will:

- Develop tools and strategies to sustain the statewide Kinship Collaboration Group and support regional Kinship Support Groups;
- Serve as a conduit for new ideas;
- Include kinship caregiver liaisons at regional kinship caregiver support groups, staff meetings, and as consultants on cases;
- Educate kinship caregivers on the foster care system;
- Educate kinship development workers regarding a sense of urgency for achieving positive permanency and the valued role of the kinship caregiver; and
- Provide deliverables to staff and kinship caregivers to inform caregivers and strengthen placement stability.

The statewide Kinship Collaboration Group will meet four times a year. Regional and statewide Kinship Support Groups will meet once a month, but no less than quarterly, according to local needs and resources. Statewide Kinship Collaboration Group participants will engage in discussion of practices relevant to the CPS system. Kinship advocates will identify those practices that work effectively and those that are problematic and develop recommendations for enhancement to the current delivery system.

The CPS kinship program specialist will provide feedback and recommendations from the state Kinship Collaboration Group members to CPS management and program specialists regarding service gaps and casework practices that need improvement.

The Kinship Collaboration Group will provide a mechanism to include kinship caregivers in CPS design, implementation, and evaluation program. This initiative encourages collaboration with kinship caregivers who are affected by the CPS service delivery system and provides a unique perspective for improving services to kinship caregivers and

children.

Activities will include:

- Continue and build upon regional Kinship Support Groups designed to assist caregivers in understanding the various processes of CPS and support the partnership between kinship caregivers and DFPS;
- Recruit kinship caregiver advocates;
- Provide trainings to staff from a kinship caregiver perspective;
- Community outreach;
- Provide deliverables to staff and kinship caregivers that will help to inform caregivers and strengthen placement stability;
- Begin exposure to key community stakeholders; and
- Enhance protocol, policy, and technical assistance to strengthen practice with kinship caregivers.

### **Expected Outcomes**

The expected outcomes for this project include:

- Improved cooperation and collaboration between kinship caregivers and CPS;
- Enhanced ability for CPS staff to work effectively with kinship caregivers;
- Increased kinship caregiver involvement in CPS activities, especially decision making and case planning;
- Reduction in disruption and increase in use of kinship placements due to increased financial support;
- Improved services that meet the individual needs of the kinship families; and
- Improved safety, permanency and well-being outcomes for children.

### **Budget**

One Kinship Program Specialist V FTE is requested. Additional funding will be used to support up to four statewide meetings. The state Kinship Collaboration Group operating budget for fiscal year 2023 is based on 26 Kinship advocates and 15 DFPS staff attending four state meetings and regional support group meetings. Note: Costs for travel of the DFPS staff to attend the state meetings is reflected in L2005 Travel below. The kinship program specialist will provide technical assistance for the regions related to kinship support groups.

The proposed budget is calculated at an attendance rate of at least two caregivers per region and one CPS staff per region and uses standard, approved state rates for travel costs.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$65,479.00
L1002	Other Personnel Costs	\$507.00
L2009S	Other Operating Expenses Salary	\$655.00

Category	Description	Amount Requested
FRINGE		\$22,263.00
OVERHEAD		\$11,858.00
IT COSTS		\$4,226.00
L2005	Travel	\$881.00
L2005M	Travel Mileage	\$65,479.00
<b>Subtotal for 1 FTE</b>		<b>\$105,869.00</b>
L2005	Travel	\$99,870.00
L2009	Other Operating Expenses	\$10,106.00
L3001	Client Services	\$110,856.00
L2001	Professional Fees & Services	\$31,323.00
L2006	Rent – Building	\$40,486.00
<b>Total</b>		<b>\$370,310.00</b>

## 11) FFPSA Implementation

The FFPSA Project Implementation responds to priorities (2), (6), (7), (11), and (12) in the Child Abuse Prevention and Treatment Act Amendments.

### Goals and Objectives

The goals of the FFPSA Project are to:

- Continue to analyze the federal legislation and determine the impact to DFPS, service providers, residential childcare providers, and the children and families that DFPS serves;
- Coordinate with DFPS Finance to determine the fiscal impact of the legislation;
- Ensure consistent internal and external FFPSA communication and coordination including, but is not limited to DFPS, HHSC, external stakeholders, and legislators; and
- Participate in implementation initiatives related to the federal legislation based on state legislation passed during the 87th Texas Legislative Session.

The FFPSA objectives are:

- Continue to analyze implementation options related to the legislation;
- Obtain input from key stakeholders;
- Coordinate with DFPS finance to complete cost estimates related to the legislation and implementation of prevention services;
- Create a communication plan to include key stakeholders;
- Ensure IT enhancements are completed to comply with the legislation; and
- Continue evaluating and executing the implementation plan to meet legislative

deadlines.

### Approach

- The CAPTA-funded FFPSA manager will work under the direction of the DFPS associate commissioner for prevention and child well-being to project manage, advise, and provide technical assistance to DFPS staff with assignments and tasks associated with the federal legislation.
- The FFPSA manager will oversee the development, analysis and implementation of FFPSA mandates.
- The FFPSA manager will consult with regional and state office management, regional caseworkers, and field staff, CPS State Office program and policy staff, external public and private stakeholders, consumers of child protective services, volunteers, advocates, judges, and other social service providers to provide FFPSA program guidance.
- The FFPSA manager will provide consultation and guidance regarding the planning, development, implementation, and monitoring of FFPSA projects and programs.
- A FFPSA budget analyst will strengthen communication about options and funding related to the impact of FFPSA options under consideration by the state.
- Both FFPSA staff will facilitate and manage program communications with internal and external stakeholders including CPS State Office staff, field staff at all levels, staff from other state and federal agencies, providers of services for agency clients, stakeholders, and legislators.
- Both FFPSA staff will oversee the compilation and analysis of data and information from various program resources and stakeholders to shape goals, objectives, and priorities.
- Both FFPSA staff will facilitate completion of studies, analyses, and research regarding program strategy policies and procedures, and develop recommendations for program and agency leadership.

### Budget

A total of two FTEs are requested:

- One FFPSA Manager IV; and
- One FFPSA Budget Analyst V.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$164,835.00
L1002	Other Personnel Costs	\$1,024.00
L2009S	Other Operating Expenses Salary	\$1,648.00
FRINGE		\$56,044.00
OVERHEAD		\$23,716.00
IT COSTS		\$7,631.00

Category		Description	Amount Requested
L2005	Travel		\$9,074.00
L2005M	Travel Mileage		\$204.00
<b>Total for 2 FTEs</b>			<b>\$264,176.00</b>

## 12) Substance Use Project

The Substance Use Project responds to priorities (1), (2), (3), (4), (5), (8), and (13) in the Child Abuse Prevention and Treatment Act Amendments.

### Goals and Objectives

The goals of the Substance Use Treatment Project are:

- Ensure effective policies and procedures are in place to address needs of infants born with and identified as being affected by legal and illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure or Fetal Alcohol Spectrum Disorder;
- Liaise with external health care stakeholders involved in delivery or care of such infants to strengthen their understanding of notification requirements;
- Strengthen protocol, policy, and practice associated with Plans of Safe Care, when required;
- Collaborate with HHSC substance use disorder and other agency representatives to improve current Plans of Safe Care standards to enhance communication between DFPS and agencies providing treatment or other support services related to opioid treatment;
- Collaborate with local stakeholders and treatment providers to ensure parents impacted by substance use disorders are receiving services in a timely manner to address substance use issues that have played a role in DFPS involvement;
- Develop experts in the knowledge and coordination of substance use disorder services and resources;
- Improve the coordination among DFPS and the HHSC Pregnant and Postpartum Intervention and OSAR programs and the Texas Office for Prevention of Developmental Disabilities, an affiliate of the National Organization of Fetal Alcohol Syndrome;
- Improve coordination between community service providers and DFPS to facilitate access to services;
- Make changes to the IMPACT system to more efficiently identify plans of safe care and referrals to appropriate services;
- Strengthen knowledge and skills of staff working with families who have substance use issues pertaining to DFPS involvement;
- Cross train staff adding mental health expertise to address co-occurring disorders of substance use and mental health.

The objectives of the Substance Abuse Treatment Project are:

- Promote the identification of newborns and infants, who were prenatally exposed and

impacted by parental substance use and abuse, as well as the development of plans of safe care for newborns and infants;

- Raise awareness of and improve access to services for people with substance use service needs, including behavioral health and auxiliary services;
- Serve as DFPS subject matter experts for internal and external key stakeholders working with children and families with substance use issues impacting DFPS involvement;
- Facilitate improved access to substance abuse treatment resources;
- Provide training to staff and community stakeholders about substance use disorder, plans of safe care, engagement of family, and available resources;
- Consult and participate in child and family service planning activities and identifying needed services; and
- Strengthen ability to support children and families with co-occurring substance use and mental health issues.

### **Approach**

- The project proposes funding the CPS Behavioral Health Services division through funding its division administrator and three substance use program specialists housed in different parts of the state. The division administrator supervises seven additional staff; two program specialists who support the use of the Child and Adolescent Needs and Strengths (CANS) Assessment tool, three mental health specialists, a behavioral health services lead, and a trauma-informed care manager who supervises six regional trauma-informed care specialists. The team will work under the direction of CPS leadership to guide CPS practice in working with children and families with substance abuse issues throughout each stage of service.
- The project proposes funding two CPI substance use disorder program specialists who report to the CPI division administrator for best practices and will guide CPI practice in investigations and alternative responses to families with substance use issues when substance use negatively impacts child safety.
- CPI and CPS staff in this project will consult with regional and DFPS State Office management, regional caseworkers and field staff, state office program and policy staff, external public and private stakeholders, consumers of child investigation and child protective services, volunteers, advocates, judges, treatment providers, medical professionals, and other social service providers to provide program guidance relating to protocol, policy, and practice regarding substance use, misuse, and treatment.
- The project will provide consultation and guidance regarding the planning, development, implementation, and monitoring of projects and programs associated with substance use treatment initiatives.
- The project will receive specialized training and strengthen practice by sharing knowledge of and incorporating best practice models for working with families.
- The project will facilitate strengthened communications with internal and external stakeholders including DFPS State Office staff, field staff at all levels, staff from other state and federal agencies, providers of services for agency clients, stakeholders, and legislators.
- The project will lead DFPS efforts regarding Comprehensive Addiction Recovery Act issues to strengthen enhancement of the agency's response to implementation and

monitoring of Plans of Safe Care.

**Budget**

A total of six FTEs is requested:

- Two CPI Substance Use Disorder Program Specialist VIs;
- Three CPS Substance Use Disorder Specialist Vs; and
- One CPS Behavioral Health Division Administrator.

Category	Description	Amount Requested
L1001	Personnel (Salary and Wages)	\$393,775.00
L1002	Other Personnel Costs	\$2,589.00
L2009S	Other Operating Expenses Salary	\$3,938.00
FRINGE		\$133,884.00
OVERHEAD		\$71,148.00
IT COSTS		\$25,356.00
L2005	Travel	\$11,202.00
L2005M	Travel Mileage	\$3,072.00
Subtotal for 6 FTEs		\$651,782.00
Specialized Training (L2009)		\$25,000.00
<b>Total</b>		<b>\$676,782.00</b>

**13) Trauma-Informed Care Project**

The Trauma-Informed Care Project responds to priorities (6), (7), and (13) in the Child Abuse Prevention and Treatment Act Amendments.

**Goals and Objectives**

The goals of the Trauma-Informed Care Project are:

- Ensure DFPS staff is thoroughly trained on trauma-informed care practices and approaches;
- Develop experts in the knowledge and coordination of trauma-informed care services for children and families in any stage of service;
- Improve the coordination between DFPS and stakeholders, including the Statewide Trauma-Informed Care Collaborative sponsored by the Children’s Commission, child-placing agencies, therapeutic service providers, and legal stakeholders, including courts; and
- Provide trauma-related consultation and training to DFPS staff members.

Objectives related to these goals are to:

- Promote the identification of adverse childhood experiences and the impact of such on children and families;
- Focus on awareness and understanding of trauma by kinship caregivers to increase placement stability in kinship and the understanding of child specific needs;
- Raise awareness of and improve access to services for people with a history of trauma;
- Serve as subject matter experts for trauma-informed care practices;
- Consult and participate in child service planning activities and identifying needed wrap around and other services to address complex needs;
- Consult with service providers to increase trauma-informed care practices utilized when treating children and families;
- Provide training to staff on Trauma-informed care practices and the impact of secondary trauma;
- Provide training and resources to staff on adverse childhood experiences; and
- Coordinate with child-placing agencies to provide trauma-informed Care training to caregivers and foster parents.

### **Approach**

The Trauma-Informed Care Project will:

- Embed trauma-informed care within regional direct delivery practice and in coordination with the Statewide Trauma-Informed Care Collaborative;
- Educate DFPS staff members about the long-term impact of adverse childhood experiences;
- Provide consultation and training to DFPS staff members related to trauma-informed care practices;
- Collaborate with local, state, and federal agencies and programs and caregivers who serve children with a history of trauma;
- Educate DFPS staff members about trauma-informed care resources available to children and families in any stage of service;
- Assist caregivers and DPS staff members in accessing appropriate services;
- Coordinate with the HHSC Local Procedure Development and Support Unit and the local mental and behavioral health authorities on referrals, enrollment, and placement of children in DFPS conservatorship in specific Medicaid waiver programs;
- Conduct training and technical assistance for DFPS and SSCC staff members and caregivers related to trauma-informed care practices;
- Provide support materials and trauma-informed parenting practices to kinship caregivers, along with connection trauma-informed community providers; and
- Partner with parent and kinship collaboration for increased understanding of the impact of trauma on children, parents, and kinship caregivers.

### **Expected Outcomes**

As a result of project activities:

- The common approach developed in the Statewide Trauma-Informed Care Collaborative Blueprint will be furthered;
- DFPS staff will have a greater understanding of the impact of adverse childhood experiences and the impact of secondary trauma;
- DFPS staff will have a greater understanding of the implications of trauma-informed

- care;
- DFPS caseworkers will be able to evaluate the needs of children who have experienced trauma;
- Caregivers will have a greater understanding of trauma-informed care practices; and
- Children with complex trauma histories will have fewer placement disruptions and a greater quality of care.

### **Budget**

A total of six CPS Regional Trauma Informed Care Specialist V FTEs are requested.

<b>Category</b>	<b>Description</b>	<b>Amount Requested</b>
L1001	Personnel (Salary and Wages)	\$405,018.00
L1002	Other Personnel Costs	\$2,685.00
L2009S	Other Operating Expenses Salary	\$4,050.00
FRINGE		\$137,706.00
OVERHEAD		\$71,148.00
IT COSTS		\$25,356.00
L2005	Travel	\$31,752.00
L2005M	Travel Mileage	\$2,574.00
<b>Subtotal for 6 FTEs</b>		<b>\$687,550.00</b>

**Fiscal Year 2023 Budget Recap  
for Special Child Abuse Prevention and Treatment Act Projects**

<b>Project Name</b>	<b>Code</b>	<b>Amount Requested</b>	<b>Priority</b>
1. Evaluation of CPS Best Practice Initiatives	89070	\$859,900.00	1, 4, 7
2. Disproportionality	89071	\$174,394.00	3, 11
3. Children with Disabilities	89072	\$896,849.00	7, 9 a&b, 13
4. Education Project	89073	\$208,783.00	3, 7, 9 a&b, 13
5. Texas Council of Child Welfare Boards	89074	\$25,608.00	11
6. Parent Collaboration Group	89075	\$177,258.00	3
7. CPI Best Practices	89082	\$1,955,650.00	1, 2, 4, 7, 13
8. CPS Best Practices	89077	\$3,258,145.00	12, 13, 14
9. Community-Based Care	89078	\$544,322.00	3, 11, 13
10. Kinship Project	89079	\$370,310.00	3, 14
11. FFPSA Implementation	89081	\$264,176.00	2, 6, 7, 11, 12
12. Substance Abuse Project	89080	\$669,963.00	1, 2, 3, 4, 5, 8, 13
13. Trauma-Informed Care	New	\$680,289.00	6, 7, 13
<b>Grand Total:</b>		<b>\$10,085,647.00</b>	

## **Planned Use of CAPTA State Grant Supplemental Funding**

DFPS was awarded \$10,036,133.00 in supplemental Chafee funding through the American Rescue Plan Act. This is new CAPTA program funding with an obligation period from October 1, 2020, to September 30, 2025.

Currently DFPS utilizes CAPTA funding to support 13 projects focused on improving safety, well-being, and permanency outcomes for children and keeping families connected. To make best use of these supplemental funds, DFPS plans to assess current projects to determine if any of the funding may be used to further advance those programs.

Additionally, DFPS will be meeting with stakeholders to determine other areas of need which may not be covered in existing CAPTA projects, placing importance on interagency collaboration and community-based partnerships to support families and ensure the safety of children, particularly in underserved communities across the State of Texas.

## **Foster Care Administrative Claiming to Improve Legal Preparation and Representation**

Pursuant to [DFPS CPS Policy Section 5000 Legal Contracts](#), counties may recover a portion of the costs of legal representation for certain children (i.e. costs of attorneys ad litem) in child abuse and neglect legal proceedings. This can be done through contracting with DFPS for reimbursement of allowable Title IV-E-related legal services paid by the county for the legal representation. The following 18 counties are currently contracted with DFPS: Bell, Bowie, Burnet, Cherokee, McLennan, Grayson, Gregg, Hardin, Harrison, Henderson, Houston, Jefferson, Nacogdoches, Smith, Starr, Washington, Williamson, Van Zandt.

Additionally, a subset of these 18 counties also claims for a portion of the costs of legal representation for certain parents in child abuse and neglect proceedings. These include Bell, Gregg, Henderson, Houston, Jefferson, McLennan, Smith, Starr, Washington, Williamson and Van Zandt counties.

## 2024 Title IV–B Annual Progress and Services Report

### B. Texas Citizen Review Teams

- *Submit a copy of annual citizen review panel report(s). Include a copy of the state agency's most recent written responses to the panel(s) that describes whether or how the state will incorporate the recommendations of the panel(s) (as appropriate) to improve the child protection system.*

This is the current Citizen Review Team Report which reflects information as of April 2023. A report for 2021-22 is posted to the DFPS public website: <https://www.dfps.state.tx.us/Investigations/CRT/default.asp>

Pursuant to the Child Abuse Prevention and Treatment Act, Section 106, each state to which a grant is made shall establish not less than three citizen review panels (teams). A state may designate for the purposes of this subsection one or more existing entities established under state or federal law, such as child fatality panels or foster care review panels, if such entities have the capacity to satisfy the requirements of paragraph (4) and the state ensures such entities will satisfy such requirements. These requirements include that each panel must by examining state policies, procedures, and practices and where appropriate, specific cases, evaluate the extent to which state and local child protection system agencies are effectively discharging their child protection responsibilities in accordance with the State plan.

Texas Family Code, Section 261.312 requires DFPS to create citizen review teams and authorizes DFPS to create one or more review teams for each region to evaluate staff casework and decision-making related to child protective investigations. Six DFPS' regions are designated as meeting the requirements of the Child Abuse Prevention and Treatment Act Appendix I, and include Regions 01, 03E, 03W, 06 (06A and 06B), 07, and 11. These regions represent a mixture of urban and rural communities and reflect a broad range of issues encountered by DFPS statewide. This report consists of information concerning the issues addressed by the citizen review teams, including the teams in the six Child Abuse Prevention and Treatment Act regions.

The Child Abuse Prevention and Treatment Act also states each panel shall prepare and make available to the state and the public, on an annual basis, a report containing a summary of the activities of the panel and recommendations to improve the child protection services system at the state and local levels. Not later than six months after the date on which a report is submitted by the panel to the state, the appropriate state agency shall submit a written response to state and local child protection systems and the citizen review panel that describes whether or how the state will incorporate the recommendations of such panel, where appropriate, to make measurable progress in improving the state and local child protection system.

### Structure

As required, all citizen review team members, including those of the Child Abuse Prevention and Treatment Act citizen review teams, are volunteers who represent a broad spectrum of their communities. The members are nominated locally and approved by the DFPS Commissioner. DFPS staff assist the citizen review team with coordination, team development, training, and statewide distribution of team reviews and recommendations. DFPS staff facilitate the meetings and the exchange of case-specific information, ensuring that confidentiality is maintained.

### **Reporting Process**

To coincide with the federal fiscal year reporting period, this report covers the period from October 2021 through September 2022 (federal fiscal year 2022). Information presented consists of data gathered by all citizen review teams, including the Child Abuse Prevention and Treatment Act Citizens Review Teams. In federal fiscal year 2022, the teams reviewed child fatalities that met criteria for a regional Child Death Review Committee.

Criteria for a regional Child Death Review Committees includes child fatality cases in which the child's death has been determined by CPI to be the result of abuse or neglect. For example, there is a disposition of Reason to Believe for an allegation with a severity of fatal (RTB – Fatal), regardless of whether the medical examiner or other external parties reach the same conclusion; and the:

- Deceased child or the designated perpetrator of the RTB – Fatal had an open CPI or CPS case at the time of the child's death; or
- Designated perpetrator of the RTB - Fatal has been an alleged or designated perpetrator in a prior CPI case within the last three years; or
- Deceased child has been an alleged or designated victim in a CPI case within the last three years; or
- Deceased child was a principal in a FBSS and/or conservatorship stage of service within the last three years.

If there was not a child fatality case meeting criterion to review in the quarter, another case was selected. These meetings included reviews of prior investigations within the last three years; previous FBSS, conservatorship, kinship, and/or adoption within the last three years, if applicable; various types of abuse and neglect allegations in cases; and appropriateness of service delivery. Reports of the meetings were documented on the DFPS Notification of Child Fatality – Part C Form.

### **Agency Response**

The citizen review teams often present recommendations for local CPI and CPS direct delivery staff about actions they would like to see taken on a particular case. These case-specific recommendations are communicated during the citizen review team meetings to the CPI and/or CPS representatives who are present and recorded on the standardized reporting form. Required actions relating to case-specific recommendations are handled at the regional level.

The citizen review teams also present recommendations with a statewide scope which are presented to the Child Safety Review Committee and DFPS leadership throughout the year for consideration of policy development, training, and coordination with external entities.

All citizen review team recommendations are placed on the DFPS public website after approval of the annual report. As required by CAPTA, DFPS will provide a written response to each recommendation within six months, and publicize the updated annual report. The DFPS public website contains a citizen review team specific mailbox the public may use to comment on the recommendations. The annual Citizen Review Team Report can be found at: <https://www.dfps.state.tx.us/Investigations/CRT/default.asp>.

### **Team Activities**

The child safety specialists within the DFPS Office of Accountability act as the citizen review team coordinator within their assigned region of responsibility. The citizen review team coordinators meet regularly with DFPS State Office program staff to discuss better ways to engage the community in the review process.

To gain essential feedback from the public, the citizens review team coordinators and the CPI and CPS regional Leadership continue to work with their communities to engage and encourage volunteers to become involved in these Teams.

### **Analysis**

During federal fiscal year 2022, the citizen review teams reviewed 92 child fatality or serious injury cases. At the time of the fatality of these cases, 13 had an open investigation; one had an open FBSS case; four had an open conservatorship case; and one case was open in both conservatorship and investigations. No recommendations were given in 34 of these reviews. Recommendations given or concerns noted as part of the other reviews were in the following areas: safety and risk, policy and practice, training needs, and coordination with external entities.

If the recommendation or concern was case specific, it was referred to regional management. Those that were noted to have a statewide scope are listed below.

DFPS values collaboration with our partners in the child welfare system in Texas. Building community relationships and partnerships is an integral part of DFPS work and is critical to providing clients with needed support. Overall, teams felt DFPS was doing well and acknowledged the department's ongoing efforts in staff development and casework improvement.

## **Chapter 1 - Safety and Risk**

### **Recommendation 1**

DFPS should consider more stringent safety plans when someone is monitoring the children in person 24/7. In addition, field staff should provide more clear direction to the

family when it comes to what supervision entails when documenting the safety plan. Further, there should be training on safety planning as it relates to how to appoint a family monitor and monitor if a supervision plan is being followed appropriately.

### **DFPS Response 1**

Safety planning is utilized solely for the purposes of supervision, and as a result, the terms safety plan and supervision plan are often used interchangeably. When implementing any safety plan, the case worker must outline what the parameters for supervision entail and discuss the expectations of supervision with the family and monitor.

Child Protective Investigations policy indicates that a safety plan must specify what actions the family will take to protect the child from any dangers identified in the home. The caseworker must ensure each person signing the Safety Plan understands and agrees to the following:

- His or her responsibilities.
- The potential consequences of non-compliance.
- The actions or circumstances necessary to eliminate the need for the safety plan.

In May 2023, DFPS policy was updated to list out the requirements for being a safety monitor and what the expectations of a safety monitor are. Staff are also receiving training and continuing education on safety plans. The training rollout will conclude at the end of August 2023.

See [3210 Safety Plan](#)

Family-Based Safety Services follows the same guidelines when implementing safety plans as those in Child Protective Investigations. DFPS' current policy requires caseworkers to use a safety plan only when there is an immediate danger to a child that requires 24-hour supervision provided by someone not involved in the safety concerns or requires a child be with their parent but away from the danger. The plan is created with the family and written in a manner the family can understand. The caseworker fills out the safety plan form which includes the need for a safety plan, how the child needs to be kept safe, who is responsible for ensuring each action, and the timeframe of the intervention and actions. The safety plan is reviewed with each parent and safety monitor and signed by all parties, indicating they agree and understand the safety plan. Each party is then given a copy of the safety plan. DFPS monitors the safety plan by contacting individuals who know the family for information surrounding the safety plan and conducting unannounced visits to the family's location. Staff receive training on safety planning during CPS Professional Development.

### **Recommendation 2**

Staff need to thoroughly assess people used for supervision or placement based on the current situation versus assuming a person is appropriate because they were used in the past. Staff should also assess people on an ongoing basis to ensure they continue to be an appropriate monitor or supervisor.

Case Specific: CPI approved a person based on their role as a supervisor of parent-child contact in a prior case; however, sufficient checks and assessments were not completed in the new investigation, and after the case was transferred, on-going stages did not complete their own assessments.

### **DFPS Response 2**

Staff are trained to assess families based on the current case dynamics regardless of that individual's role as a supervisor in a prior case. Case workers must articulate why the identified individual currently meets the qualifications to serve in a capacity as a supervisor or placement based on the needs of the current case.

As of May 2023, policy will be updated to list out the requirements for being a safety monitor and what the expectations of a safety monitor are. Staff also receive training and continuing education on safety plans.

Caseworkers are not permitted to utilize a previously used safety monitor who had a criminal history and child abuse history check in a previous case without re-running the checks on the person for the new case. While DFPS would consider an individual with positive history as a child caregiver, the potential caregivers should always be thoroughly assessed including criminal background, DFPS records checks, social history interviewing, and calling collateral contacts (references) each time they are asked to be a supervisor or placement. DFPS continues to assess individuals while they are providing supervision/placement by conducting unannounced visits and collateral contacts (reference).

### **Recommendation 3**

DFPS should implement multi-level checks and balances above the worker and supervisor level to ensure safety and timely review of case actions. Specifically mentioned was the possibility of an additional function in DFPS' case management system IMPACT to alert the next level of management (program director) when the required review is outstanding.

Case Specific: The 15-day review required by policy was not completed, and there currently is not a Data Warehouse report or IMPACT alert provided to management notifying them this task has not been completed by the supervisor.

### **DFPS Response 3**

Current practice is for a supervisor to review a caseworker's case at the 15<sup>th</sup> day after stage progression or when a danger has been identified during the investigation. Supervisors use a variety of data warehouse reports to track case actions and these reports are utilized to help identify which cases require a 15-day review. A program director may review an investigation within their program at any time at their discretion. These reviews may be part of a quality control review or when staff have requested additional support on an investigation. Therefore, no additional alerts are needed beyond the Supervisor level. In addition, DFPS is currently working with the data team to add an

additional component to the Data Warehouse report that identifies if the Safety Assessments have been completed per policy.

#### **Recommendation 4**

Forensic interviews through the child advocacy center should be requested and attempted from surviving siblings as they might yield more information. In addition, it connects families to services at a different level than DFPS can provide.

Case Specific: Surviving siblings were under the age of 4 years, and documentation reflected they had limited verbal skills. The team indicated a forensic interview may have provided additional information regarding the abuse even with limited vocabulary.

#### **DFPS Response 4**

Current practice requires that case workers investigate serious physical injury cases, including fatalities, jointly with law enforcement. A referral to a Child Advocacy Center would be made on all of these cases unless DFPS and law enforcement determine such an interview would negatively impact the surviving children, or the children could not be qualified for a forensic interview due to limited verbal or comprehension skills. When a forensic interview does not take place, the case worker would interview any children in an age-appropriate manner to gather the required information.

### **Chapter 2 - Policy and Practice**

#### **Recommendation 1**

When a child has a medical-related diagnosis, the worker must contact medical professionals and obtain the official diagnosis, treatment plan, and compliance information. If referrals are made, the worker should follow up with the service provider prior to closure of the stage of service, as this would help mitigate risk factors. In addition, DFPS should make additional efforts to identify or confirm a family support for these families prior to case closure.

Further recommended was the expansion of the Primary Medical Needs staffing required for children in conservatorship to include primary medical needs children involved in investigations or FBSS as way to ensure all supports and medical care is being followed.

#### **DFPS Response 1**

In August 2022 DFPS updated trainings for investigative staff to provide additional guidance on when a case should be referred to the Forensic Assessment Center Network (FACN). This includes complex medical cases in which a child may have a serious medical condition or diagnosis. Child Protective Investigations policy requires a caseworker to contact the (FACN) when seeking medical professionals' expertise in evaluating a child's medical history, reviewing diagnosis, treatment plans and compliance with all medical requirements.

See [2233 Making a Referral to the Forensic Assessment Center Network](#)

DFPS is also working on a medical resource form that would be completed by the parent or caregiver for all complex medical cases. The form would list out of the medical providers along with their contact information. The case worker would be required to contact all listed medical providers to confirm current diagnosis, caregiver compliance with treatment, and medical needs. The form is still under development and review with an unknown completion date.

In the May 2021 CPS Meeting in a Box, all Family-Based Safety Services (FBSS) staff were instructed to conduct monthly PMN staffing's that involve children on their caseload with serious and/or complex medical conditions or multiple medical diagnoses. Those monthly staffing are to begin upon the opening of the FBSS case as soon as the condition/diagnosis is identified or if the children come into Conservatorship. The staffing's must include DFPS' medical staffing team to include the Nurse Consultants and DFPS Medical Director, Program Administrator, Program Director, Supervisor, and Caseworker and continue until the case closes. Caseworkers are to contact healthcare professionals each month to discuss any concerns or progress with the children and caregivers. Families and caseworkers are also encouraged to have a Family Group Conference to discuss support and future medical needs before closing the case. While held in every region for all cases, the format of the staffing varies in each region.

The Director of CPS Field Support will be recommending to CPS Leadership in July 2023 that the PMN staffing be added to Family-Based Safety Services (FBSS) policy. If approved, estimated policy update would be by the end of calendar year 2023.

## **Recommendation 2**

Child death cases should be automatically referred for a multiple disciplinary team staffing.

## **DFPS Response 2**

DFPS is already required by law to refer all child fatality cases in which there are surviving children in the deceased child's household or under the supervision of the caregiver involved in the child fatality to a MDT. If a county is not served by a center that has executed an interagency memorandum of understanding, DFPS can refer a case for an MDT to a center in an adjacent county. Additionally, Child Advocacy Centers may refer other cases for a MDT staffing if they deem the case to be appropriate. The current practice is that DFPS follows recommendations for the MDT and attends all meetings.

See TFC 264.4061. [MULTIDISCIPLINARY TEAM RESPONSE REQUIRED.](#)

### **Recommendation 3**

Criminal history checks should be among the first priorities when initiating an investigation to ensure staff is aware and able to discuss criminal history in the initial assessment of the family.

### **DFPS Response 3**

Criminal history checks are completed as part of the initial investigation tasks in accordance with policy. The policy requires that checks be completed within 10 calendar days of the date of the intake as long as enough information is available to complete the check. It is best practice that criminal history checks be completed prior to making initial contact on an abuse or neglect investigation. The case worker runs and reviews criminal history on all adult alleged perpetrators and any person 14 years or older living in the victim's home. These checks allow the caseworker to discuss with the family any discrepancies or concerns identified with these checks.

See [2230 Investigation Tasks](#)

### **Recommendation 4**

Where there is extensive history in a case, CPI should assign cases to staff who have more experience in recognizing trends and patterns or developed skills to ensure higher risk cases get the level of attention needed.

### **DFPS Response 4**

Current CPI practice is a supervisor reviews an intake to determine if the intake meets the statutory definition of abuse or neglect before stage progressing to an investigation. The supervisor may assign an investigation to a specific caseworker depending on the complexity of the intake and subsequent history on the family. Additionally, some counties have specialized units that handle cases involving sexual abuse allegations or serious injuries. In those areas, those complex cases are routed to those units.

CPS considers a variety of factors when making case assignments. The family's history is one of those factors but is not a sole determinant of case assignments.

### **Recommendation 5**

DFPS should look at drug testing all people who are utilized to care for the children as a safety plan supervisor or those whom the family has chosen as a parental child safety placement. A small pilot study was suggested to determine the approval rates of the potential supervisor after drug testing.

Case Specific: The caregivers selected were also using illegal substances; however, all their background checks and references cleared them per policy.

### **DFPS Response 5**

Child Protective Investigations and Child Protective Services policy requires a caseworker to have cause to believe, based on credible evidence, that a parent or caregiver is using substances, and the use threatens a child's safety before administering or referring a

person for a drug test. In addition, Texas Family Code §264.902(a)(5) DFPS can include any term necessary for the safety and welfare of the child as an element of the placement agreement. However, if the caseworker suspected a safety plan caregiver or Parental Child Safety Placement (PCSP) caregiver was using drugs or under the influence of drugs, DFPS would not utilize the proposed caregiver as a safety plan supervisor or PCSP.

If the caseworker is unaware through criminal history checks, collateral calls, or other information of any possible drug use by the supervisor/caregiver, the caseworker would not have reason to request drug testing. Drug testing is a tool that is not used alone but is one component of assessing child safety and caregiver capacity.

#### **Recommendation 6**

Hair-strand drug testing should occur on cases where there are ongoing allegations of drug usage in the home to ensure child safety.

#### **DFPS Response 6**

Current practice is for DFPS to utilize hair strand testing when it is deemed appropriate. Hair strand testing captures historical use (use from approximately 10 days prior to collection to approximately 100 days prior to collection) and is limited on the number of substances captured (Marijuana, Cocaine, Amphetamines/Methamphetamines, Opiates, and PCP). Urinalysis testing is capturing current use (typically within the last 3-5 days) and has a broader number of substances detected (in addition to the substances captured by the hair strand, the urinalysis test will also capture Benzodiazepines, Methadone, Oxycodone, Barbiturates, MDA analogues, and Propoxyphene). Hair strands are valuable tools that are utilized when appropriate. Due to the time, it takes various drugs to metabolize and reflect in hair strand testing, it is difficult to determine a parent/caregiver was under the influence while caring for a child when using this test.

#### **Recommendation 7**

DFPS should do more to notify and evaluate the absent parent to prevent removal.

#### **DFPS Response 7**

Child Protective Investigations policy requires the caseworker to make reasonable efforts to locate both parents of each alleged victim. This is accomplished by completing a diligent search for the absent parent, asking the child when they last spoke to the absent parent, reviewing case history for any information on the absent parent, or asking known relatives for the absent parent's contact information. DFPS policy requires that the absent parent be notified, or attempts be made to notify the absent parent within 24 hours of making contact with an alleged victim of abuse or neglect.

#### **Recommendation 8**

If the court has dismissed DFPS from a legal case, there should be a policy exception to making on-going contact with the family while the investigation is still open. As well, the DFPS should explain to the court and all legal parties that even though the legal case is dismissed DFPS still has an open investigation and will be continuing to make contact monthly with the family until case closure. This provides the court an opportunity to determine further DFPS permissible contact with the family.

### **DFPS Response 8**

Current practice is once a legal case has been dismissed or the department's request for legal intervention is denied by the court, DFPS discontinues the investigation against the family. Instead of adopting this recommendation as a policy, DFPS would reeducate staff about current policies of working with investigation staff during an open conservatorship episode, as well as, how to articulate any concerns about the investigation to the overseeing Court. CPI will develop a communication to be sent to all CPI staff or a webinar that is available to all.

If the Court has ruled and dismissed DFPS, in this sense, the Court is dismissing the Cause number associated with the Conservatorship (legal) case, which typically spans 12-18 months. As such, DFPS, through the Conservatorship staff, has no legal standing or necessity to remain involved with the family.

### **Recommendation 9**

CPI should consider a more standard practice of having all children under the age of 4 years seen by a doctor at the beginning of the case, specifically if the allegations are medical neglect or physical abuse when bruising is observed.

### **DFPS Response 9**

Child Protective Investigations policy permits a medical, psychological, or psychiatric assessment of the child during a DFPS investigation. To obtain authority for a medical, psychological, psychiatric, or similar assessment, the caseworker must, in the following order of preference, obtain parental consent or a court order permitting the assessment, which will only be issued if good cause is shown. Furthermore, the cost of having a child seen at doctor's office that is not tied to abuse or neglect may fall to the parents.

### **Recommendation 10**

Staff should refer to bruising and injuries as physical abuse versus excessive discipline so as not to downplay that abuse has occurred; promote the use of referrals to the Forensic Assessment Center Network; and ensure medical examinations are completed on young children as not all injuries will be visible when they are internal.

### **DFPS Response 10**

A caseworker may contact Forensic Assessment Center Network to seek a medical professional's expertise in child abuse and neglect to determine if the injuries sustained

by the child are concerning for abuse or neglect. A caseworker is trained to assess if the injuries sustained are from reasonable forms of discipline versus excessive discipline.

Additional medical evaluations are determined on a case-by-case basis based on the child's outcry, collateral concerns, and the caseworker's assessment on the family.

### **Recommendation 11**

When vulnerable children are identified as having been present during an incident of domestic violence, they should be referred to the Child Abuse Resource and Education (CARE) Team for evaluation to ensure no injuries.

### **DFPS Response 11**

Current practice is to refer a vulnerable child to the Child Abuse Resource and Education (CARE) Team based on the multiple factors in the case. There are often high number of cases in which a child may have been present during a domestic violence incident so additional criteria may need to be developed to ensure that CARE teams can address the danger and risk factors identified in the case.

For areas without a CARE Team, the FACN's may be able to assist.

### **Recommendation 12**

Children who have witnessed any form of domestic violence in the home should be referred to counseling and/or therapy.

### **DFPS Response 12**

Current practice is to refer a vulnerable child to therapy/counseling based on the needs of the family. The caseworker discusses with the parent, when working with adult victims of domestic violence, on what services are available to the family and what best fits the needs of the family.

When it is determined that children know there is a person using violence or have witnessed any form of domestic violence against a parent, caretaker, or other family member a referral for supportive services by a professional knowledgeable of domestic violence dynamics should be considered and if exhibiting distress perhaps also referred to counseling/therapy. Many children who have knowledge or have witnessed the use of domestic violence bounce back quickly when intervention results in safety for adult and child victims and changes in the behavior of the person who has used violence. Some may need counseling if they have been harmed and continue to be afraid or feel guilty for not being able to stop the person using violence and are taking on too much responsibility.

### **Recommendation 13**

Attorneys representing DFPS must present all information gathered by DFPS to the court, including juvenile criminal records.

Ultimately, the case must be resolved within a year (with the possibility of a six-month extension) of when DFPS received temporary custody of the child(ren). At trial, DFPS has the burden of proof to offer evidence to the court supporting the relief it seeks.

Regarding juvenile records, these are not records kept by DFPS, so DFPS would have to be obtained these from the Texas Juvenile Justice Department. To the extent DFPS has these records, DFPS is unauthorized by law to release the records absent a court order, as state and federal laws prohibits the release of these records. See Texas Administrative Code, 700.204(b); Texas Government Code, Sections 411.114 and 411.1141.

### **DFPS Response 13**

Courts in child protection cases are required to consider extensive evidence presented by DFPS throughout the entirety of the case and must do so in accordance with the Texas Family Code, Rules of Civil Procedure, and Rules of Evidence. The statutory framework governing these cases is designed to keep courts and the parties informed about why DFPS is involved and the ongoing events in the case.

This begins with when DFPS seeks legal intervention or removal of the child, which is governed by Texas Family Code chapter 262. DFPS must provide an affidavit with a Petition seeking to affect the parent-child relationship, which details the reasons for the Department's involvement, the Department's concerns, and a listing of prior criminal and CPS history. Additionally, the court must conduct a hearing to determine whether the Department should receive the relief they seek, evidence must be presented, and the court must make explicit findings to support its orders. For more details,

See [Texas Children's Commission Benchbook - Removal](#).

Additionally, the statutory framework governing child protection cases under Texas Family Code, Chapter 263 requires the trial court conduct numerous hearings throughout a case, including a "Status Hearing" to review the family plan of service, and numerous "Permanency Hearings" to review the status of the children and progress of the parents on their services. DFPS is required to file a court report prior to each Permanency hearing. In every one of these hearings, the trial court hears testimony and must make findings that it has reviewed the reports, service plans, and other information submitted to the court, which often includes independent reports produced by CASA.

Further, during the case and prior to trial, the parties are entitled to request "Discovery", which can involve producing the entire case record for the case and answering legally binding questions about the case.

See [Child Protection Attorneys Guide - Section 6 - Discovery](#)

Ultimately, the case must be resolved within a year (with the possibility of a six-month extension) of when DFPS received temporary custody of the child/children. At trial, the Department has the burden of proof to offer evidence to the court supporting the relief it seeks.

Regarding juvenile records, these are not records kept by DFPS and would have to be obtained from the Texas Juvenile Justice Department. To the extent that the Department has these records, the Department is unauthorized by law to release the records absent a court order, as there are state and federal laws prohibiting the release of these records. See TAC 700.204(b); Government Code section 411.114; Government Code section 411.1141.

**Recommendation 14**

Require all affidavits filed with the court to be uploaded to One Case for further review by others as needed.

**DFPS Response 14**

Current practice is for staff to upload all affidavits into One Case. Additionally, this will be included in policy around documentation guidelines that is scheduled to roll out in Fall of 2023.

**Recommendation 15**

TDFPS needs to have at minimum, the preliminary autopsy findings before a Reason to Believe – Fatal disposition is determined, and the Reason for Death is chosen as abuse or neglect related.

**DFPS Response 15**

Current practice is to obtain all information available before reaching a disposition of reason to believe. However, autopsy reports are generally not readily available to DFPS within established DFPS timeframes to complete an investigation. Furthermore, most medical examiners will not provide a “preliminary” autopsy report beyond the generic finding of “pending” for the cause and “pending” for the manner of death. This is particularly true on infant and toddler fatalities due to pending toxicology results.

Child fatalities that are determined to be the result of abuse or neglect are supported by a preponderance of evidence to support the disposition even if the case is closed prior to receiving the final autopsy report. The caseworker assigns the Reason to Believe disposition to an allegation if, based on the preponderance of evidence gathered during the investigation, the caseworker concludes that the alleged abuse or neglect occurred, and the alleged perpetrator is responsible for it. Once DFPS learns of the autopsy report that is not consistent with the disposition, DFPS would request an administrative review to determine if a change to the disposition findings is needed.

**Recommendation 16**

Staff should verify a person's identity by requesting proof of identity.

**DFPS Response 16**

Child Protective Investigations policy requires a caseworker to identify the person they are speaking with by reviewing their government issued ID or request the person state

their DOB and SSN so the caseworker can compare against any information already available.

See [2248.4 Obtaining Demographic Information from Principals](#)

### **Recommendation 17**

Upon closure of an investigation, all families should be provided with local resources to help them in the future

### **DFPS Response 17**

Current practice is, while not mandated in policy, for all caseworkers to be encouraged to provide families with local community resources that can be utilized by the family in the future.

## **Chapter 3 - Training Needs**

### **Recommendation 1**

DFPS should provide staff with ongoing and more consistent statewide training regarding family dynamics in households where domestic violence is occurring. An annual number of training hours should be required for all levels of staff. Different levels of training are needed for newer versus more tenured staff to build upon prior knowledge and understanding. This would enhance staff ability to gather information needed to ensure child safety in a home where violence is taking place in addition to learning how to better engage the non-offending parent.

### **DFPS Response 1**

Staff receive training on family dynamics where family violence is occurring, assessing for family violence, dispositions, partnering with victims, and complete activities that educate on the long-term effects of family violence with children and into adulthood.

Caseworkers must complete a certain number of training hours on various topics for each certification level. The trainings that are offered after initial training and part of certification requirements include in-person and online trainings related to family violence. There are currently more than 10 courses related to family violence available to staff on an ongoing basis.

Center for Learning and Organizational Effectiveness (CLOE) will advise both CPI and CPS Leadership that they are able to do the following upon their request:

Create a course that is based on actual cases (deidentified) where supervisors are required to identify dynamics of family violence, substance use, or mental health. The course would be geared toward supervisors and PDs when discussing cases with their staff, reviewing documentation, and approving cases.

CLOE will approach CPI/CPS program with the listed suggestion by May 31st to discuss a time frame for development of a project plan for each requested training topic.

### **Recommendation 2**

Training regarding bottle propping and communicating its dangers to families, much like dangers of co-sleeping, should be provided to all staff. Additionally, more in-depth conversations should occur with families about co-sleeping, including questions such as why they choose to co-sleep, instead of staff reading off the handout required per policy.

### **DFPS Response 2**

Current practice is for a caseworker to educate parents on appropriate forms of bottle feeding. Current policy requires all caseworkers to ask about co-sleeping/safe sleeping, observe the location where the child sleeps, and in some instances photograph the location of where the child sleeps (children 0-5).

Training to staff includes content on keeping children safe with in depth discussion about resources that are available to families about car seat safety, storing chemical hazards, swimming pools and co sleeping. The dangers of co-sleeping are discussed in depth as well as how to have those conversations with parents/caregivers. Staff receive training on assessing the home environment which includes co sleeping. Staff also receive training on interviewing families and asking solution focused questions. Although bottle propping is not specifically focused on this can be added to the next curriculum update or create a video that demonstrates how workers can discuss this with families. Center for Learning and Organizational Effectiveness (CLOE) will approach CPI/CPS program with these suggestions by May 31st to discuss a time frame for development of a project plan for each requested training topic.

### **Recommendation 3**

Staff should be educated regarding circumstances when siblings of an injured child need skeletal exams, as well as what to ask for when scheduling forensic exams including providing medical information from the pediatrician; and knowing the difference between the various CARE teams.

### **DFPS Response 3**

Staff are given instruction on types of abuse that includes fractures, serious injuries, burns, and bruising indicative of physical abuse. Staff are trained on collaborating with Forensic Assessment Center Network (FACN) and complete a required training on utilizing the FACN. Staff are also required to learn about the child advocacy centers in their area and the services provided. Another training staff receive is "Investigations of serious injuries and child deaths". Training provided is regarding investigation of critical incidents as it relates to child injuries and deaths.

Center for Learning and Organizational Effectiveness (CLOE) will advise both CPI and CPS Leadership that they are able to do the following upon their request:

Create Guided Training Aids for mentors to use while working with proteges on ITP tasks. Topics mentioned in the notes include:

- When to refer children/siblings for forensic interviewing
- When to request skeletal exams

CLOE will approach CPI/CPS program with the listed suggestion by May 31st to discuss a time frame for development of a project plan for each requested training topic.

#### **Recommendation 4**

Ensure children are being forensically interviewed when criteria are met or when staff feels it would be beneficial. Perhaps a case study could be utilized as a training tool to provide staff with alternative case decisions or identify red flags or signs.

#### **DFPS Response 4**

CPI/CPS Professional Development was updated in 2021 and real cases and examples were incorporated into the training. Staff receive instruction on interviewing which entails elements of forensic interviewing, when a forensic interview is required, and what a forensic interview consists of. Training models require staff to demonstrate competencies of interviewing adults and children. Staff practice interviewing adults and children with a mentor before being assigned cases on their own and must also pass competency-based evaluations. There is also an advanced interviewing course offered to staff as part of their certification requirements. This course includes benefits of a forensic interview and when these are required.

Center for Learning and Organizational Effectiveness (CLOE) will advise both CPI and CPS Leadership that they are able to do the following upon their request:

Create Guided Training Aids for mentors to use while working with proteges on ITP tasks. Topics mentioned in the notes include:

- When to refer children/siblings for forensic interviewing
- When to request skeletal exams

CLOE will approach CPI/CPS program with the listed suggestion by May 31st to discuss a time frame for development of a project plan for each requested training topic.

#### **Recommendation 5**

Several teams identified the need for staff community resource awareness to provide additional support to families who have children with special needs (e.g., autism, medically fragile, intellectual or developmental disability, significant mental health, etc.) outside DFPS involvement. This would include services such as respite, education, and coordination of care services, especially needed in rural areas.

#### **DFPS Response 5**

In September of 2021, CPS Behavioral Health and Medical Services staff initiated rotating trainings for CPI/CPS stages of service on a monthly basis. The trainings continue to occur, and each cover topics such as how to access mental health and medical services for children with special needs, as well as services like YES Waiver program and Medicaid benefits. CPS Behavioral Health and Medical Services have developed regionally specific resource presentations that are delivered as requested to staff in all CPI/CPS stages of service on topics such as accessing emergency services. These trainings remain available to staff (CPI/CPS and Community Based Care staff) on an ongoing basis. Staff are also informed that services for children with autism, intellectual/developmental disabilities, and mental health can be accessed through the Local Mental Health Authorities and the Local Intellectual/Developmental Disability Authorities. This is available even in rural counties and are the gateway to wraparound services and intensive case management services outside of DFPS involvement. This information is easily accessed through the HHSC website, which is continuously updated and provided to staff. County-specific information about mental health resources available in the community and emergency response services can be easily identified online on the HHSC website. The website includes an interactive component. A Meeting in a Box presentation on accessing the HHSC county-specific resources was distributed in October 2022 for both CPI and CPS staff.

#### **Recommendation 6**

More collaboration and joint trainings with community agencies and resources that assist with legal and custody issues.

#### **DFPS Response 6**

Current practice is for DFPS staff to provide and participate in collaborative trainings with various stakeholders, particularly Court Appointed Special Advocates (CASA), HHSC, and school systems with a focus on child welfare cases including where to seek legal advice.

#### **Recommendation 7**

More community resources should offer parent-child conflict type assistance focused on older children.

Case Specific: In the case of a suicide by a teenager placed with relative, there may have been more DFPS could have done during a conservatorship case, such as notifying the courts of the detrimental situation and the need for counseling. The providers could have spoken to the courts about the severity of the situation and emphasize the need to place the children back in care. DFPS' method of measuring risk in the home should be reviewed, since it was based on the grandmother's household without much history, and thus rated moderate. With the current rating, the grandmother's case did not require services. Training with the courts is needed to make them aware of these cases involving teenagers participating in risk-taking behaviors and their dangers. DFPS staff may need this same training to be better prepared in presenting cases to the courts. Perceptions of teenagers with mental health issues needs to change.

### **DFPS Response 7**

Effective September 19, 2022, HHSC Child Care Regulation (CCR) adopted a model suicide prevention, intervention, and postvention policy for use by residential child-care facilities. The statute also requires each residential child-care facility to adopt either the CCR model policy or another suicide prevention, intervention, postvention policy that has been approved by Executive Commissioner of HHSC.

The model requires employees to complete annual training to include risk factors, protective factors, and warning signs of suicide; understand safety planning; and understand suicide screening. The training consists of an online portion (estimated 1 hour maximum), as well as an instructor led portion (30 minutes).

This training is currently being provided to all CVS, FAD and ADO staff in both legacy and SSCCs. CPAs are also required to provide to their staff.

### **Recommendation 8**

Provide further training regarding:

- Domestic violence;
- Gun-safety and local resources for free or low-cost gun safety courses;
- Signs of mental health;
- Root causes of behavior and the impact of early trauma;
- Communicating more effectively with service providers;
- Recognizing substance use (What does addiction look like?);
- Drug testing tools and what we are trying to test for;
- Working with teens and pre-teens and useful interventions;
- “How to be an FBI Detective” for CPI staff; and
- The importance of case merging.

### **DFPS Response 8**

Staff currently receive training on the listed topics. Training curriculum is updated on a regular basis to be enhanced with current content, policy, and protocol updates, and updated to address current trends. The next review will include assessing the amount of information and instruction for these topics and any identified adjustments will be implemented.

## **Chapter 4 - Coordination with External Entities**

### **Recommendation 1**

Sufficient resources should be made available to assist the non-offending/protective parent, who wants to seek legal custody, but cannot afford it or lacks the knowledge of the civil legal system. This could include legislation to protect a parent financially or setting up specialized court dockets for these parents where DFPS cannot legally intervene, but

legal orders are needed to ensure child safety and permanency. Expand upon legal programs and pilot projects across the state that do assist families in these situations, including expansion of legal financial resources.

### **DFPS Response 1**

The creation of specialized court dockets or funding for attorneys for parents not involved in DFPS-initiated Suits Affecting the Parent Child Relationship (SAPCR's) is solely within the purview of the Legislature. Courts can only appoint attorneys if it is authorized under the law. Indigent parents who appear in opposition to DFPS initiated SAPCR's seeking conservatorship of children have the right to a court appointed lawyer under Texas Family Code, Section 107.013. This same right to appointed counsel does not extend to indigent parents in private SAPCR's.

There are already resources that may be helpful to these parents. Legal Aid offers pro bono attorneys statewide for qualifying low-income individuals.

[Legal Aid](#)

[2023–2024 Referral Directory - Legal Services and Other Resources](#)

For people who do not qualify, Texas Law Help offers resources and information that are helpful in navigating the legal process.

[Texas Law Help](#)

### **Recommendation 2**

Collaborate with local law enforcement to provide staff training and resources on drugs prevalence and trends in the community.

### **DFPS Response 2**

Current DFPS practice has Substance Abuse Program Specialists in both Investigations as well as Ongoing Services that provide trainings on substance use related topics including trainings about drugs seen within specific areas. DFPS also has Special Investigators which have law enforcement experience and within the Special Investigations division there is a training team that has developed and presented trainings on drug awareness.

DFPS is also taking a strong approach to public awareness campaigns such as “One Pill Kills” and other substance abuse awareness trainings. In April 2023, CPI and CPS employees were informed of the requirement to complete the training ‘Facing Fentanyl: A Caseworker’s Guide’. This training will also be added to the DFPS certification training plan for FY24. Expectations included that Regional administration discuss the One Pill Kills campaign with all direct reports in May. Subsequently, all DFPS caseworkers will be expected to discuss and provide information on One Pill Kills! during all in-person contacts with children and families. The concerns around fentanyl will also be discussed during all Family Group Conferences, Circles of Support, Parent Collaboration Groups and with all children in child watch placements. There will also be posters at all child watch locations

to ensure that youth have access to the information at all times. DFPS Newsletters and broadcasts will also discuss Fentanyl awareness and resources.

The Department collaborates with law enforcement on a regular basis and staff are encouraged to attend as many trainings as possible to maintain current with trends.

### **Recommendation 3**

Educate and train hotel personnel on identifying situations to refer to Statewide Intake, specifically for those children not of school age or not attending school.

### **DFPS Response 3**

To provide this level of community education and outreach would require a community training program or division within DFPS, specifically dedicated to providing community education regarding when to report concerns of abuse/neglect. This training would be available to any place of business where children might be present (shopping areas, restaurants, etc.). Currently, regional staff have provided presentations of when to report concerns or abuse/neglect to various community organizations upon request.

### **Recommendation 4**

DFPS should provide education to local law enforcement (e.g., cadet training or police academies, etc.) regarding when to make a referral, as well as DFPS policies, joint investigations, forensic assessment center network, forensic interviews, multiple disciplinary team meetings, etc.

### **DFPS Response 4**

Current practice is for our Special Investigators to serve as Law Enforcement Subject Matter Experts and liaise with local law enforcement agencies. Special Investigators provide Mandatory Reporter training for various Law Enforcement agencies and academies across the state. The Special Investigators are available to provide the training as requested or when the offer is accepted by law enforcement. Special Investigators also co-present with the Texas Department of Public Safety during their "Interdiction for the Protection of Children" course across the state.

### **Recommendation 5**

Report lawyers and people who do not report suspected abuse and neglect to the appropriate entity (i.e., law enforcement, district attorney's office, State Bar of Texas).

### **DFPS Response 5**

DFPS encourages reporters who have a good faith belief that abuse, or neglect has occurred to a child to report. Currently there is no policy to require reporting/referring attorneys or other individuals who are professional mandatory reporters if they do not report abuse or neglect; however, there is no policy that would prohibit such report/referral

either. It would not be common for DFPS to gain the knowledge or evidence that an attorney or other professional reporter has not reported abuse/neglect.

### **Recommendation 6**

In general, DFPS should have a memorandum of understanding with state parole/probation officials. DFPS should have access to a statewide contact person, or a database CPI and CPS could obtain information regarding a person's probation/parole status.

### **DFPS Response 6**

CPI/CPS is already able to obtain information regarding a person's probation/parole status. A person's community service (probation) or parole status is indicated on the criminal history check (CHH) that DFPS already obtains from law enforcement. In addition, staff can also obtain conditions of community service or conditions of parole through the District Clerk's office. While a statewide database may be a faster process, building and/or accessing a database would take the incorporation of the 254 Texas counties' information into one central database for access to information that can already be obtained through other methods and would require the buy-in of Texas counties.

### **Recommendation 7**

The team discussed the barriers in policies and practice with regard to different county judicial system requirements. For example, the court requiring the family's initial plan to be family reunification despite DFPS recommendations or case circumstances.

Case Specific: The team felt this policy was not protective of the children and asked questions about who would be held accountable if the family was reunified and another child died.

### **DFPS Response 7**

Texas Family Code, Section 153.002, states "The best interest of the child shall always be the primary consideration of the court in determining the issues of conservatorship and possession of and access to the child." Additionally, all courts considering child protection cases are required to follow the Texas Family Code, which establishes specific hearings that are required in every case, what courts must consider at each of these hearings, and the explicit findings that courts are required to make at each hearing. Descriptions of these hearings and the final trial are contained in the links below.

[Adversary Hearing Checklist](#)

[Status Hearing Checklist](#)

[Permanency Hearing Before Final Order Checklist](#)

[Final Hearing Checklist](#)

Regarding Family Reunification, DFPS' policy puts reunification as "the preferred primary permanency goal for every child in substitute care who is in CPS temporary managing

conservatorship.” The underlying reason for this policy is to keep families together and to afford parents an opportunity to work on service plans to alleviate the reasons the children came into the Department’s care. However, Family Reunification may not be an appropriate goal in certain circumstances, such as aggravated circumstances, in “particularly egregious” cases, when a parent has relinquished their rights, when a parent cannot be found despite due diligence, or when ongoing reunification efforts have failed. Further, DFPS can have a concurrent goal in addition to Family Reunification, and the permanency plan can change during a case if reunification efforts have failed.

See [6234.1 Family Reunification](#)

### **Recommendation 8**

When legal denies and then a fatality or serious incident occurs, DFPS should notify the attorneys of the outcome and discuss the case to find out what, if anything, could have been done to obtain legal intervention. Additionally, the courts should be notified when DFPS disagrees with the court’s reunification or dismissal ruling, and then a fatality or serious incident occurred after case closure.

### **DFPS Response 8**

Currently, Regional Attorneys and local county and district attorneys explore other legal interventions, such as motion to participate or aid to investigate orders should the facts of a case not satisfy the legal criteria for removal. Motions to participate asks courts to order parents to complete court-ordered services in circumstances where the evidence does not legally support the removal of the child from the parent. An Order in Aid of Investigation orders uncooperative parents to allow access to the child for interview, examination, and investigation, as well as the release of records that parents do not consent to release.

Should legal intervention be denied, and should a subsequent serious injury or death occur, Regional staff are advised if the removal was denied by Regional staff. If the removal is denied by a local county or district attorney, Regional staff do notify the local county or district attorney of the subsequent death or serious injury. In both scenarios, discussions are conducted to determine what, if any options for legal intervention might have been used. Regarding the courts, such notification would be an inappropriate ex-parte communication with the court. Additionally, high profile cases receive media coverage in the local communities.

### **Recommendation 9**

The team would like to see a type of database for children at high risk of death from caregivers who meet certain criteria, such as previous child fatalities, serious injuries, or sexual abuse. This would be similar to how the Bureau of Vital Statistics deals with parents who have Reason to Believe – Fatal designation or rights terminated.

### **DFPS Response 9**

DFPS continues to evaluate how to best engage families when they have had prior involvement with Child Protective Investigations or Child Protective Services, including

termination of parental rights, serious injuries, or sexual abuse. All investigations completed by Child Protective Investigations include a risk and safety assessment as well as a severity determination with the disposition associated with the investigation. This information remains in IMPACT for all confirmed allegations to help inform any future involvement with the family to ensure ongoing child safety. Any expansion of the work with the Department of State Health Services (DSHS) would have significant impact, including the following: overall quality of data matching process; the number of staff needed for review, processing, and potential reporting to DFPS; possible increase in the number of CPI investigations and ongoing CPS services. DFPS remains committed to working collaboratively with families, communities, stakeholders, and other state agencies to enhance policy and practices surrounding investigations, interventions, and services provided to children, youth, and families.

### **Recommendation 10**

Preventative services should be put into place for victim children to break the cycle of abuse in the family.

### **DFPS Response 10**

Current practice is to refer victim children to therapy/counseling or additional assessments to determine what services and supports are recommended by licensed mental health providers. The caseworker discusses with the parent or caregiver the services that are available to the child and the family.

### **Recommendation 11**

Develop mentorship programs to help families navigate CPI and CPS, such as expanding the Parent Collaboration Groups in conservatorship to include investigations and FBSS.

### **DFPS Response 11**

DFPS is not in the process of developing a mentorship program at this time; however, the Department is in the process of re-energizing our Parent Collaboration groups (PCG) across the state and filling our Parent Liaisons vacancies. This includes quarterly brainstorming and information meetings with each region as well as consistent recruitment of new parent volunteers. There is also quarterly communication via email or newsletter with information regarding resources that can help parents in the system that include substance abuse, mental health, domestic violence, education, and basic needs.

Parent Collaboration groups are already open to any parent involved with the Department. They help parents navigate their open investigation, open Family-Based Safety Services case, or conservatorship case. This group is made up of parents who have been involved in the child welfare system.

The importance of filling the Parent Liaisons vacancies is to strengthen the parent voice and bring in a diversity of ideas and experiences. This allows the PCG to make the best recommendations for improving the child welfare system.

To fill the Parent Liaison vacancies, the Parent Program Specialist and Fatherhood Specialist are working in collaboration with the Faith-Based Specialist/Community Specialist, Stakeholders, Parent Liaisons, CPS Liaisons to re-energize the PCG and its recommendations. The plan is to have virtual and in-person meetings with key stakeholders in all the organizations that support children and families associated with child welfare.

Recruitment efforts are also being evaluated within each region to fill the vacancies of the Parent Liaisons. Through collaboration with agency and community stakeholders, the Parent Program Specialist will discuss current recruitment efforts and the result of these efforts as well as any areas that can be improved upon. They will coordinate with the DFPS Liaisons to implement any changes to the recruitment efforts and establish effective recruitment plans specific to each region's needs.

## 2024 Title IV–B Annual Progress and Services Report

### C. Neonatal Update

*Provide an update on the state's continued efforts to support and address the needs of infants born and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including information on:*

- The plans for using CAPTA State Grant funding to support the development, implementation and monitoring of plans of safe care for substance-exposed infants. Any changes made to policy or practice and/or lessons learned from implementation of plans of safe care.*
- Any multi-disciplinary outreach, consultation, or coordination the state has taken to support implementation (e.g., among the state CPS agency; the state Substance Abuse Treatment Authority, hospitals, health care professionals, home visiting programs and Public Health or Maternal and Child Health Programs; non-profits, philanthropic organizations; and private providers).*
- The current monitoring processes of plans of safe care to determine whether and in what manner local entities are providing referrals to and delivery of appropriate services for substance-exposed infants and affected family members and caregivers. Describe the process for the ongoing monitoring of the plans of safe care.*
- Any challenges identified in implementing the provisions and any technical assistance the state has determined is needed to support effective implementation of these provisions.*
- If the state has previously participated in a CB site visit relating to development of plans of safe care for infants born and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, please describe any follow up actions the state has taken to address issues identified or discussed through the site visit.*

### **Policies and procedures to address needs of infants born with and identified as being affected by legal and substance abuse or withdrawal symptoms resulting from prenatal drug exposure or Fetal Alcohol Spectrum Disorder:**

DFPS uses the definitions of child abuse and neglect found in Texas Family Code, Section 261.001, as well as the Texas Administrative Code.

The Texas Family Code requires professionals, including medical staff and employees of healthcare facilities that provide reproductive services, to report child abuse and neglect. DFPS policy further specifies infants who are prenatally exposed to substances and those identified as being affected by substances, exhibiting withdrawal symptoms from prenatal exposure, or diagnosed by a medical condition as a result of prenatal substance exposure such as Fetal Alcohol Spectrum Disorder, are investigated by DFPS.

### **Requirement that health care providers involved in delivery or care of such infants notify CPS of occurrence of such condition of such infants:**

If DFPS receives a report alleging a newborn was prenatally exposed to substances, the caseworker is required to complete a risk assessment within 30 days of the child's birth,

complete a Family Plan of Service, provide referrals to screen and assess for substance use disorder and subsequent referrals to an appropriate substance use disorder treatment facility and child(ren) to Early Childhood Intervention, if they show signs of developmental delays, issues, or concerns. When appropriate, caseworkers will refer to Women and Children's Residential Treatment, where a mother can receive substance use disorder treatment with her child(ren) on-site. The caseworker will also provide the family information on newborn safe sleep precautions, Sudden Infant Death Syndrome, and locally available community-based, trauma-informed parenting education programs.

CPS policy addresses prenatal substance exposure and substance-affected infants. See CPS Handbook, Sections 1963.1 "Infants Exposed or Affected by Substances" (updated October 2020) and 15211.1 "Referrals to Early Childhood Intervention" (updated April 2016), respectively. CPS Policy, Section 2363 provides field staff guidance on the dispositioning of cases where an infant was prenatally exposed to alcohol or substances.

In addition to the dispositioning guidelines, the standardized definition of prenatal exposure reads as follows:

#### **Criteria for Pre-Natal Exposure**

The mother's use of alcohol or a controlled substance meets the criteria for pre-natal exposure when there is a preponderance of evidence the mother knew or reasonably should have known she was pregnant, yet used alcohol or a controlled substance that was:

- Not lawfully prescribed by a medical practitioner;
- Lawfully prescribed because the mother sought out multiple healthcare providers to exceed ordinary dosages; or
- Not being used in accordance with a lawfully issued prescription.

Staff investigating these cases, review all available evidence in support of possible pre-natal drug exposure, including any prenatal records, birth records, prenatal drug tests administered by the hospital, and collateral information from medical professionals as well as from family. As this evidence is collected, these cases are staffed on an individual case-by-case basis and safety decisions are made with regards to placement, supervision, and appropriate referrals to substance use disorder treatment services.

If a Plan of Safe Care is provided to the field worker, it is used as part of the comprehensive assessment including speaking with service providers who assisted the family prenatally, as appropriate.

If DFPS develops the Plan of Safe Care, it is done on a case-by-case basis as families are affected by substance use in unique ways. A comprehensive assessment of each unique family discovers different strengths, available support networks, and community resources to better support the infant, parents, and family. The Plan of Safe Care is routinely reviewed, modified, and adjusted by the supervisor and direct field worker based on case progress, supports to the family, health of the child, and compliance with expectations set out at the beginning of the case.

When there are no longer safety concerns within the family, DFPS in partnership with the family seeks to connect families with long-term supports within the community. Those community-based providers may in turn provide additional support as needed while engaged with the family. Thus, DFPS can only monitor the Plan of Safe Care during an open case where safety concerns are present within the family.

However, it may be necessary for the infant to be placed in a more controlled setting if such support is not sufficient or present in the family composition or if safety concerns continue to be present within the family. In these situations, Plans of Safe Care are continuously monitored and updated as needed by the case worker and supervisor based on the needs of the family.

DFPS has identified the need to develop training and coordination for staff to ensure that there is a consistent understanding on the plan of safe care requirements and that there is consistency with how those plans are documented. Plan of Safe Care trainings are available to CPS and CPI provided by community partners.

DFPS actively collaborates with Health and Human Services Commission and Department of State Health Services to strengthen collaborative efforts to address substance use disorders impacting the safety, permanency, and well-being of children involved with the Texas child welfare system.

DFPS collaborates with Baylor College of Medicine and its partner to develop a more standardized Plan of Safe Care initiated in the hospital setting and would travel with the family through various settings including child welfare, treatment facilities, and the healthcare setting. This standardized Plan of Safe Care model is currently available in Harris County but continues to spread throughout Texas through healthcare settings.

DFPS utilizes CAPTA funding (see the CAPTA section) to assist external stakeholders who work with the Texas child welfare agency, social services agencies, substance use disorder treatment agencies, hospitals with labor and delivery units, hospital staff, public health and mental health agencies, and maternal and child health agencies. Specifically, the funds will be used by DFPS to facilitate collaboration in developing a stronger service delivery coordination between child welfare staff, providers of substance use services, and others. DFPS employs two CPI and three CPS substance use specialists to assist and support caseworkers and families who use substances to provide education, support, and connection to appropriate community-based resources for the infant, mother, and the whole family.

The DFPS PEI, CPI, and CPS divisions meet monthly with external state partners, HHSC Behavioral Health Services, the Texas Department of State Health Services Maternal and Child Health Services, and other key stakeholders for a behavioral health leadership team meeting. This cross-agency leadership team meeting between DFPS, HHSC, and DSHS improves coordination and services to families involved with DFPS due to substance use and behavioral health issues. The collaboration improves current Plans of Safe Care

standards, ensure coordinated service delivery, and enhance communication between DFPS and inter-related agencies providing treatment, or other support services, related to substance use disorder treatment. The project also addresses federal legislation related to the Comprehensive Addictions and Recovery Act (CARA) and FFPSA, and state legislation passed with the conclusion of the 86th Texas Legislature.

Throughout this process current and future goals for DFPS include:

- Improving state and local systems with Plan of Safe Care development, implementation, and monitoring;
- Refining policies, procedures, or protocols to ensure DFPS is notified when an infant is born substance exposed and/or substance affected, and a plan of safe care is in place before the infant is discharged from the birth or healthcare facility;
- Training health professionals, CPS and CPI workers, substance use disorder treatment agencies, and law enforcement in effective ways to coordinate treatment and best serve families involved with the Texas child welfare system due to substance use;
- Establishing collaborations, partnerships, and agreements between stakeholders, including health professionals, child welfare professionals, juvenile and family court judges to develop or strengthen multi-disciplinary assessments and intervention processes and treatment approaches designed to keep infants with their mothers.

DFPS frequently collaborates with community-based, state-funded, and local programs managed by HHSC such as

- Outreach, Screening, Assessment and Referral (OSAR) Center streamlining substance use services screenings per CPS Policy,
- Intervention Programs such as Pregnant and Parenting Intervention (PPI) and Parenting Awareness and Drug Risk Education Services (PADRES) to address at-risk and high-risk families impacted by substance use through intervention services aimed to assist pregnant and parenting clients in reducing risk factors associated with substance use and improve the health of families at risk, and
- Local substance use disorder treatment providers to ensure parents impacted by substance use disorders are receiving services in a timely manner to address the substance use issues that have played a role in DFPS involvement. Families involved with DFPS are required to be served by HHSC facilities within three business days of seeking substance use services.

**Provide information on any changes made to implementation and/or lessons learned from implementation.**

DFPS has been selected to receive In-Depth Technical Assistance (IDTA) from the National Center on Substance Abuse and Child Welfare (NCSACW) to support the implementation of a statewide framework that supports families affected by parental marijuana use. This statewide framework will provide cross-system education and awareness to internal (Statewide Intake, Community Wellness, Intervention, and Services) and external stakeholder (hospital partners, community stakeholders) to improve outcomes for families affected by parental marijuana use.

DFPS continuously reviews CAPTA reporting requirements to ensure compliance. Through this continued review it has been determined that the capture and reporting of certain data could and should be bolstered. As part of a Senate Bill requirement, DFPS will update technology systems for improved data collections and monitoring plans of safe care. As part of this goal, DFPS will be able to capture the number of infants reported by caseworkers to be prenatally exposed to substances, the substance used prenatally, and the number of removals where substance use by the parent or caregiver was reported as required by Senate Bill 195, 86th Legislature, Regular Session, 2019.

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## D. American Rescue Plan Act Funding

*In addition to regular appropriations in FY 2021, the CAPTA State Grant and the CBCAP program both received supplemental appropriations through the American Rescue Plan Act (ARPA) of 2021 (P.L. 117-2). ARPA included \$250 million in supplemental funding for the CBCAP grant program and \$100 million in supplemental funding for the CAPTA that remain available for expenditure through September 30, 2025. As of January 2023, states had drawn down less than 8 percent of the CAPTA State Grant funds available. Therefore, CB urges state agencies to be proactive in ensuring that these funds will be able to be used in a timely and effective manner.*

*CB provided guidance on the supplemental funding provided by ARPA in [ACYF-CB-PI-21-07](#) and [ACYF-CB-IM-22-03](#). As discussed in that guidance, the ARPA supplemental funding for the CAPTA State grant may be used to improve the child protective services system of the state in a manner consistent with any of the 14 program purposes of CAPTA outlined in section 106 of CAPTA. CB strongly encourages states to use the funds in ways that advance racial equity and provide support for those who have been historically underserved or marginalized by child welfare systems, while ensuring the safety and well-being of all family members. We also urge states to examine their legal definitions of neglect and frontline practice to disentangle poverty from neglect.*

*As part of the state's 2024 Annual CAPTA Report Update:*

- Provide an update on the state's use to date and planned use of the supplemental funding provided through ARPA.*
- Describe how the state has engaged with families, community-based agencies, or other partners to plan for the use of funds and how issues of equity are informing the planned use of the funds.*
- Describe any barriers or challenges the state has experienced in being able to access or use the supplemental funds.*

### **CAPTA State Grant Supplemental Funding**

DFPS was awarded \$10,036,133.00 in supplemental Chafee funding through the American Rescue Plan Act. This is new CAPTA program funding, with an obligation period from October 1, 2020, to September 30, 2025.

To make best use of these supplemental funds, DFPS assessed needs across all eligible divisions within the agency, placing special importance on projects that supported interagency collaboration and community-based partnerships to support families and ensure safety of children, particularly in underserved communities across the state.

As a result of this effort, the DFPS CAPTA Supplemental State Grant Spending Plan was finalized in the Spring 2022 and includes seven projects:

1. **All Pro Dads Initiative – All Pro Dad Chapters** provide children and their fathers the opportunity to engage in meaningful conversations utilizing character building curriculum in a school-based setting. This project will increase DFPS' activities around fatherhood engagement.
2. **Advancing Work to Address Disproportionality** – Funding to support three new staff positions to support the agency's on-going work to address disproportionality and disparities.
3. **Additional Support for Youth Hotline** – Funding to support one new staff position needed to maintain youth hotline.
4. **Public Awareness Campaign to Promote Parenting Hotline** – The Texas Youth Helpline and the DFPS PEI program are partnering to add additional services that carters to parents. Funding will be used for a campaign to promote the helpline and raise awareness.
5. **TARE System Improvements** – Funding will be used to improve this application for both internal and external users, to include search capabilities, child- family matching and registration process. Improvements will allow for new capabilities, such as bulk edits, photo management, notifications, kinship registration, and archiving.
6. **Support for External Learning Management System** – Funding to sustain three temporary staff positions to support the on-going training, tracking, and technical assistance needs of external stakeholder-users of the CLOE Learning Management System.
7. **Secure Public Portal for Background Checks** – Project allows for efficiencies in background checks that are newly under the jurisdiction of the Department.

### **CAPTA CBCAP Supplemental Funding**

DFPS was awarded \$24,681,320.00 in supplemental Community Based Child Abuse Prevention funding through the American Rescue Plan Act. This is new Community Based Child Abuse Prevention program funding with an obligation period from October 1, 2020, to September 30, 2025.

To make best use of these supplemental funds, the DFPS PEI gathered input from prevention partners including parents and youth, the Prevention Framework Workgroup (i.e., Texas' Thriving Families, Safer Children collective steering committee), the grantee roundtable, and grantee providers. In addition, Texas held its 87th legislative session in the Spring 2021, creating the opportunity for legislative direction. As part of the state budget, the Texas Legislature authorized \$1.3 million per biennium for expansion of Nurse Family Partnerships programming and \$5 million per biennium for expansion of Community Youth Development programming using Community Based Child Abuse Prevention American Rescue Plan Act supplemental funding. The remaining amounts were left to DFPS' discretion as the Community Based Child Abuse Prevention lead agency based on stakeholder input, needs assessment, and leadership decisions.

DFPS placed special importance on projects that support collaboration and community-based partnerships to support families and ensure safety of children, particularly in

underserved communities across the state. DFPS continues to support the following programs and activities with American Rescue Plan Act funding in FY 2023:

**Family Resource Centers:** DFPS is using the supplemental funding, along with Community Based Child Abuse Prevention formula funding, to support three family resource centers which provide innovative access to an array of direct services to families that support child development, increase protective factors, and serve as a community hub of support services.

**Healthy Outcomes through Prevention and Early Support Expansion:** The funding allowed expansion to two Healthy Outcomes through Prevention and Early Support (HOPES) programs in Texas which is a flexible community grant that funds a wide variety of innovative initiatives and supports for families with children ages 0 to 5 years.

**Texas Nurse Family Partnership Expansion:** The funding allowed expansion to five Texas Nurse Family Partnership programs which are a free, voluntary home visiting program where nurses partner with first-time mothers to improve prenatal care and provide one-on-one child development education and counseling.

**Community Youth Development Expansion:** The funding allowed expansion to four Dallas County ZIP Codes with high incidence of juvenile crime. Community Youth Development programs and services that target the well-being of youth are an important part of supporting family and community well-being.

**Innovations Grants:** DFPS released a funding opportunity to select Prevention and Early Intervention program grantees to apply for an innovation grant. Grants were awarded to ten existing grantees to resource innovative ideas, both as continued responses to challenges communities and families face with the COVID-19 pandemic, and as part of continuous efforts to further effective primary and secondary prevention programming. The innovations address one or more of four priority areas:

- Elevating parent and youth voice, and leadership;
- Promoting access to supports for all community members;
- Meeting families' basic needs; and
- Providing crisis support to families.

**Parent Helpline:** The Texas Youth Hotline established a separate parent helpline using the current helpline infrastructure. The new parent helpline bolsters PEI's parenting support website, [www.getparentingtips.com](http://www.getparentingtips.com), and provides a warmline for parents and caregivers to reach out for additional tips and local resources. Parents can call the number, chat, or text at any time and have access to a team of individuals that will navigate callers to available resources and services that offer parenting support. The helpline averages around 450 contacts per week.

**PEI Division infrastructure:** PEI hired a parent partner program specialist to support the development of a prevention-focused parent advisory council and facilitate parent leadership and engagement activity across PEI. The division also hired a continuous

quality improvement program lead to support staff and grantees with understanding and using data for continuous quality improvement and a program position with expertise to lead work with military and veteran families.

**PEI Reporting System Improvements:** New data system functionality to improve tracking and reporting of outcomes has enabled grantees to track outcome performance on their own more frequently and support continuous quality improvement. PEI research and evaluation staff are engaged in a data literacy and continuous quality improvement training plan to assist staff and grantees in understanding and utilizing the newly available data.



**TEXAS**  
Department of Family  
and Protective Services

# **The State of Texas**

## **2024 Annual Progress & Services Report**

### **Section X. Statistical and Supporting Information**

- A. Information on Child Protective Service Workforce**
- B. Juvenile Justice Transfers**
- C. Education and Training Vouchers (attachment C)**
- D. Inter-Country Adoptions**

**Texas Department of Family and Protective Services**  
**ACYF-CB-PI-23-01**

# 2024 Title IV-B Annual Progress and Services Report

## X. Statistical and Supporting Information

### A. Child Protective Services Workforce

*For child protective service personnel responsible for intake, screening, assessment, and investigation of child abuse and neglect reports in the state, report available information or data on the following:*

- *information on the education, qualifications, and training requirements established by the state for child protective service professionals, including requirements for entry and advancement in the profession, including advancement to supervisory positions;*
- *data on the education, qualifications, and training of such personnel;*
- *demographic information of the child protective service personnel; and information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor*

The Texas Department of Family and Protective Services (DFPS) currently recruits for employees in several different ways:

#### **Internet Presence**

DFPS jobs are posted in the Health and Human Services Job Center. Postings are accessible through the main DFPS website, (<http://www.dfps.state.tx.us>). By selecting the "Jobs" link, potential applicants are taken to the "[Come Work for Us](#)" page that includes worker job preview videos and written realistic job previews. There is also a self-assessment potential applicants can complete to help them decide if the job is the right fit. Jobs posted in the Health and Human Services Job Center automatically populate on the Texas Workforce Commission website for greater visibility. DFPS announces upcoming career fairs and posts interest stories on social media sites, such as Facebook and Twitter. Also, DFPS' LinkedIn page enhances visibility through connection with the other social media platforms.

#### **Other Recruitment Efforts**

Hiring and program staff attend local job fairs, university career fairs, and host open houses in local offices. Coordination with military bases and out-processing centers has increased to attract veterans leaving the armed forces. Special interest stories or articles are occasionally used at the local level to promote employment with DFPS and are utilized in areas particularly challenged by low applicant pools.

#### **Pre-employment Testing**

Employment selection instruments help identify the most qualified applicants based on. Tools used include a written statement of interest allowing the candidate to express their passion for child welfare work. DFPS added stage-specific interview questions in hopes

of identifying a potential employee's match for a specific type of Child Protective Investigations (CPI) or Child Protective Services (CPS) worker position.

### **Targeted Degrees**

Texas Human Resources Code, Section 40.0326 requires DFPS to target recruitment efforts to candidates who hold a bachelor's degree or advanced degree in at least one of the following academic areas: social work, counseling, early childhood education, psychology, criminal justice, elementary or secondary education, sociology, or human services. The General Appropriation Act allows DFPS to pay an additional 3.4 to 6.8 percent above the base pay to new hires holding a targeted degree. Hiring specialists and agency regional staff attend university career fairs and present to departments or classes to recruit students with the applicable majors.

### **Staff Pay Increases**

The 85th Texas Legislature appropriated additional funding in fiscal year 2017 to give CPI and CPS caseworkers and other regional direct delivery staff pay raises to make their salaries more competitive with the general workforce. The intent was a decrease in turnover and improved retention which continues to be the general result. Additionally, the 88th Texas Legislature appropriated funding for all state employees in the 2024-25 biennium to address ongoing needs to retain and attract experienced staff. A five percent across-the-board raise is scheduled for July 2023 and September 2024.

### **Investigative pay for CPI Investigators and Investigative Supervisors**

DFPS provides a \$5,000 annual emolument to investigation caseworkers and investigation supervisors as authorized by the General Appropriations Act.

### **Bilingual Recruitment**

DFPS recruits bilingual workers by using consistent testing for bilingual skills and implementing a consistent policy for bilingual pay. New hires to an area offering bilingual pay receive an additional 6.8 percent to their base salary.

### **Extra Pay for Social Work Graduates**

DFPS provides an increase to the starting salary for newly hired CPI or CPS employees who have a master's degree in Social Work.

### **Focused Recruitment Activities**

When certain criteria exist for any single job, DFPS will take special measures to ensure positions are filled timely with potentially long-term staff. Criteria include low applicant pool, low quality applicant pool, or high number of vacancies. If criteria are met, DFPS can use the following solutions:

- Organize hiring fairs to interview a large number of applicants by coordinating with multiple supervisors to interview for their vacancies simultaneously;
- Partner with the DFPS Communication division to produce special interest stories;
- Work with partners, Northgate Arinso, DFPS Human Resources staff and the DFPS Background Check unit, to expedite all phases of the hiring process;
- Increase human resources specialist for targeted areas, when necessary;

- Work with contracted partners to expedite certain hiring activities;
- Optimize LinkedIn features with:
  - ▶ Contract for two recruiter seats and a hiring manager to quickly review candidates, leave notes on candidate's profiles, and provide feedback to others so allows DFPS may input search criteria, get targeted results, and prioritize candidate;
  - ▶ Post up to four job postings at one time; and
  - ▶ Career page with traffic ads to showcase DFPS career options and attract applicants which drives LinkedIn members to follow the DFPS page with a single click on the ad, so they can quickly explore and apply to open jobs within DFPS;
- Post 20 job requisitions a month via social media (e.g., Facebook, LinkedIn, Twitter);
- Participate in statewide hiring fairs with same day interviews;
- Optimize Indeed features:
  - ▶ Free job postings which allow for screening for qualified applicants;
  - ▶ High visibility of job postings with monthly visitor traffic totaling more than 300 million; and
  - ▶ Indeed, posting requirement for DFPS HR Specialists; and
- Utilize the Handshake network ([www.joinhandshake.com](http://www.joinhandshake.com)):
  - ▶ Network includes more than 9 million active student users, 1,400 college and university partners, and 650,000 employers;
  - ▶ Employers can post jobs and share with specifically targeted colleges and universities;
  - ▶ Students and alumni can search jobs and submit resumes;
  - ▶ Messaging system allows employers and applicants to directly communicate with each other; and
  - ▶ DFPS HR Specialists are required to post on Handshake.

**Degrees and certifications required for child welfare workers and other professionals responsible for the management of cases and child welfare staff:**

Entry-level CPI or CPS worker positions require at a minimum one of the following: Bachelor's degree OR associate degree with two years of relevant work experience; 60 college credit hours and two years of relevant work experience; OR 90 college credit hours and one year of relevant work experience. The education must be from an accredited college or university. All majors are accepted, but Texas Human Resources Code, Section 40.0326 identifies academic areas with priority consideration as explained above.

## CPS Staff and Recent Hire Demographic Information as of August 31, 2022

CPS Staff Demographics	Caseworker	Supervisor
Overall Turnover Rate	27.0%	12.3%
<b>Agency Tenure</b>		
< 1 Year	674	0
1-3 Years	885	3
> 3 Years	2,322	538
Entry Salary		
Average Age	38	42
<b>Race/Ethnicity</b>		
African American	35.1%	33.6%
Anglo	29.9%	39.9%
Asian	1.0%	0.4%
Hawaiian/Pacific Islander	0.1%	0%
Hispanic	31.5%	24.2%
Multiple Ethnicities	2.2%	1.1%
Native American	0.2%	0.7%

Note: Investigators receive an additional \$5,000 per year. The additional compensation, broken into monthly payments is added to the investigator's base salary after 120 days of employment in an eligible position.

### Information related to tracking staff turnover and vacancy rates:

DFPS currently tracks staff turnover rates and the reasons for employee turnover, including promotions, retirements, dismissals, voluntary resignations, and demotions and lateral moves due to voluntary and involuntary actions. The tracking system captures turnover rates by month (annualized), fiscal year, DFPS region and position type. Additional metrics can be evaluated as needed.

### Information on Child Protective Service Workforce

For personnel responsible for intakes of child abuse and neglect reports in Texas, education, qualifications, and training requirements for Statewide Intake (SWI) staff includes:

- SWI Specialist I:** Bachelor's degree OR associate degree and two years of relevant work experience; OR 60 college credit hours and two years of relevant work experience; OR 90 college credit hours and one year of relevant work experience. Relevant experience includes work in a social service-related field.
- SWI Specialist II:** Employed as a Statewide Intake Specialist for nine months AND Statewide Intake Specialist Certification OR currently employed as a Statewide Intake Specialist II OR previous experience as a Statewide Intake Specialist II in Texas Department of Family and Protective Services.
- SWI Specialist III:** Nine months as a Statewide Intake Specialist II AND currently

employed as a Statewide Intake Specialist II AND Statewide Intake Advanced Specialist Certification; OR currently employed as a Statewide Intake Specialist III; OR previous experience as a Statewide Intake Specialist III at DFPS.

4. **SWI Specialist IV:** 24 months as a Statewide Intake Specialist III AND currently employed as a Statewide Intake Specialist III AND an active Statewide Intake Advanced Specialist Certification; OR currently employed as a Statewide Intake Specialist IV OR previous experience as a Statewide Intake Specialist IV at DFPS.
5. **SWI Supervisor I:** Two years of full-time experience at DFPS in CPS\*, adult protective services\*\*, or protective services statewide intake.
6. **SWI Supervisor II:** Two years of full-time experience as a Statewide Intake Supervisor I; OR two years supervisor experience in Texas CPS, childcare licensing, or adult protective services with a minimum of one year as a Statewide Intake Supervisor I.

\*CPS is professional social work where primary duties are providing social casework services to abused, neglected, or exploited children and their families; or in recruiting, studying, and certifying foster and adoptive homes.

\*\*Adult Protective Services are those provided by DFPS or a protective services agency to disabled adults ages 18 to 64, elderly persons, or persons served at local mental or behavioral health facilities who are in a state of abuse, exploitation, or neglect.

For personnel responsible for screening, assessment and investigation of child abuse and neglect reports in Texas, education, qualifications, and training requirements for staff include:

1. **CPS Specialist I:** Bachelor's degree OR associate degree and two years of relevant work experience; OR 60 college credit hours and two years of relevant work experience; OR 90 college credit hours and one year of relevant work experience. Relevant experience includes work in a social service-related field.
2. **CPS Specialist II:** Employed as a Child Protective Services Specialist I for nine months AND Child Protective Services Specialist Certification; OR currently employed as a Child Protective Services Specialist II; OR previously employed as a Child Protective Services Specialist II at DFPS.
3. **CPS Specialist III:** Employed as a Child Protective Specialist II for nine months AND Child Protective Specialist Advanced Certification; OR currently employed as a Child Protective Specialist III; OR previously employed as a Child Protective Specialist III at DFPS.
4. **CPS Specialist IV:** 24 months as Child Protective Specialist III AND currently employed as a Child Protective Specialist III AND Child Protective Specialist Senior Advanced Specialist Certification; OR currently employed as a Child Protective Specialist IV; OR previously employed as a Child Protective Specialist IV at DFPS.
5. **CPS Supervisor I:** Bachelor degree from an accredited college or university and three years of full-time experience in Child Protective Services\* or child placement services\*\* in a public social services agency, OR 60 accredited college hours and four years of CPI or CPS casework work experience; OR 90 accredited college credit hours and three and one-half years of CPI or CPS casework experience; OR currently employed as a Child Protective Services Supervisor; OR previously employed as a

Child Protective Services Supervisor I at DFPS.

6. **CPS Supervisor II:** Completion of Phase I Child Protective Services Specialist Certification and Child Protective Services Supervisor Certification; OR currently employed as a Child Protective Services Supervisor II; OR currently employed in a family and protective services management position in the Child Protective Services program at a level above Child Protective Services Supervisor AND prior experience as Child Protective Services Supervisor; OR previously employed as a Child Protective Services Supervisor II.

\*Child Protective Services is professional social work where primary duties are providing social casework services to abused, neglected, or exploited children and their families; or in recruiting, studying, and certifying foster and adoptive homes.

\*\*A child placement service is the Decision-Making process around placing and monitoring children in licensed 24-hour childcare facilities and in adoptive placement in compliance with state and federal regulations.

**CPS Personnel Intake and Investigation Staff Demographic Information for Federal Fiscal Year 2022**

	Intake	Investigation	Conservatorship	Family Based Safety Services
<b>Gender</b>				
Female	79.8%	76.4%	86.4%	88.8%
Male	20.3%	23.6%	13.6%	11.2%
<b>Age</b>				
< 25 Years	5.6%	7.4%	6.2%	2.4%
25 - 29 Years	22.8%	22.2%	22.9%	17.8%
30 - 39 Years	35.3%	32.9%	37.3%	41.8%
40 - 49 Years	21.6%	21.4%	20.7%	23.9%
50+ Years	14.8%	16.1%	12.9%	14.3%
<b>Ethnicity</b>				
African American	30.5%	32.2%	30.8%	34.6%
Anglo	34.6%	32.3%	34.0%	27.8%
Asian	0.7%	0.8%	0.9%	0.5%
Hawaiian/Pacific Islander	0.1%	0.1%	0.2%	35.3%
Hispanic	31.1%	31.1%	31.1%	1.5%
Multiple Ethnicities	2.8%	3.0%	2.6%	34.6%
Native American	0.4%	0.5%	0.4%	0.3%

\*NOTE: Age is based on the employee's age on the last day of the federal fiscal year (8/31/22) or their age as of their last day with DFPS during Federal Fiscal Year 2022.

**Information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (CAPTA section 106(d)(10)).**

**CPS Supervisors and Caseworker Caseload Information for Federal Fiscal Year 2022**

	Average Count
Intake	1.1
Investigation	14.6
Conservatorship*	16.5
Family Based Safety Services	4.5

NOTE: DFPS has no specific requirements on the average or maximum caseload. Caseloads for individual workers will vary according to the circumstances of each individual case and the capabilities of each individual worker. DFPS is required to use a private vendor for human resource functions. The applicant

tracking system does not transfer the degree information from the application to the new employee's personnel record. Additionally, there is no uniform data format required by the application system. Consequently, this information is not available in a useful format.

DFPS recognizes the importance of this information and developed a plan to capture the information by expanding the role of the outside vendor that performs initial applicant screening and has the capacity to capture degree information. Improvements were made to facilitate more reliable collection of applicant data. Matching applicant data to eventual hires still requires manual intervention; however, DFPS has gained greater insight into the types of degrees held by applicants.

## **B. Juvenile Justice Transfers**

- *Report the number of children under the care of the state child protection system who were transferred into the custody of the state juvenile justice system in FY 2022 (specify if another time period is used).*
- *Describe the source of this information, how the state defines the reporting population, and any other relevant contextual information about the data.*

### **Juvenile Justice Transfers**

In Texas, juvenile justice cases are separate and distinct from CPS cases brought by DFPS. Cases are not automatically transferred when a youth in DFPS custody becomes involved with a juvenile justice agency. Although the juvenile court may give responsibility for the child's placement and care to the local or county juvenile probation department, DFPS often retains conservatorship of the child, and the two cases proceed separately.

If a juvenile is committed to the Texas Juvenile Justice Department because of serious or repeated offenses and DFPS has temporary managing conservatorship of the child, the CPS court could dismiss the DFPS case. However, the CPS court is prohibited by Texas Family Code, Section 263.501(g) from dismissing DFPS' conservatorship when DFPS has permanent managing conservatorship of the child.

For the purpose of this report, DFPS considers a child transferred to a juvenile justice agency if DFPS' conservatorship was dismissed within 30 days before or after the child was adjudicated. Using this method, DFPS concluded there were no youth in DFPS conservatorship in state fiscal year 2022 whose custody was transferred to a juvenile justice agency

### C. Education and Training Vouchers

#### Attachment C

Annual Reporting of Education and Training Vouchers Awarded Name of State: **Texas**

<b>Time Period</b>	<b>Total ETVs Awarded</b>	<b>Number of New ETVs</b>
<b>Final Number: 2021-2022</b>	407	123
<b>School Year</b> (July 1, 2021, to June 30, 2022)		
<b>2022-2023 School Year*</b> (July 1, 2021, to June 30, 2022)	*415 (*estimate)	*220 (*estimate)

*The asterisk indicates the number provided is an estimate. A final number will be provided in next year's state plan which is how this information has been provided from Texas in past years.*

## **D. Inter-Country Adoptions**

- *Report the number of children who were adopted from other countries and who entered into state custody in FY 2022 as a result of the disruption of a placement for adoption or the dissolution of an adoption, the agencies who handled the placement or the adoption, the plans for the child, and the reasons for the disruption or dissolution.*

### **Inter-Country Adoptions**

Children adopted from other countries who are reported to be abused and/or neglected are entitled to child abuse/neglect intake and investigation services. Private child-placing agencies provide adoption and post adoption services to families adopting children from other countries. Services that specifically target children adopted abroad are not being developed by DFPS.

The DFPS reporting system enables DFPS to identify the number of children removed from their families who were previously adopted internationally. DFPS obtains social histories when children come into foster care and also documents information related to the agencies that handled the placement or adoption, the plans for the child, as well as the reasons for that removal if due to abuse and neglect. This enables staff to report information on inter-country adoptions that disrupt or ended in dissolution, resulting in DFPS being named the child's managing conservator.

In fiscal year 2022, three children who were previously adopted internationally came into DFPS foster care. Based on the international adoptions of these three children, one of the children's adoptions was by a public agency in Russia called Adoption Covenant. The two other adoptions were by private agencies from China and Uganda. The private agencies were designated as unknown because no agency name was provided by the adoptive parents.

Two children were removed due to refusal to accept parental responsibility alone. One child was removed due to lack of mental health or mental retardation services alone. The plans for the three children included family reunification, unrelated adoption, and unrelated permanent managing conservatorship.



**TEXAS**  
Department of Family  
and Protective Services

## **The State of Texas**

### **2024 Annual Progress & Services Report**

#### **Section XI. Financial Information**

- A. Payment Limitations Title IV-B Subpart 1**
- B. Payment Limitations Title IV-B Subpart 2**
- C. CFS-101 Part III**

**Texas Department of Family and Protective Services**  
**ACYF-CB-PI-23-01**

# 2024 Title IV-B Annual Progress and Services Report

## XI. Financial Information

### A. Payment Limitations – Title IV-B, Subpart 1

**Section 424(b)(2)(c) LIMITATION ON USE OF FEDERAL FUNDS FOR CHILD CARE, FOSTER CARE MAINTENANCE PAYMENTS, OR ADOPTION ASSISTANCE PAYMENTS. —**The total amount of Federal payments under this subpart for a fiscal year beginning after September 30, 2007, that may be used by a State for expenditures for childcare, foster care maintenance payments, or adoption assistance payments shall not exceed the total amount of such payments for fiscal year 2005 that were so used by the State.

Texas did not expend any title IV-B, subpart 1 funds in fiscal year 2005 for childcare, foster care maintenance or adoption assistance. In accordance with this limitation, the state certifies that no title IV-B, subpart 1 funds were expended for these purposes in 2022 or 2023.

**Section 424(b)(2)(d) LIMITATION ON USE BY STATES OF NON-FEDERAL FUNDS FOR FOSTER CARE MAINTENANCE PAYMENTS TO MATCH FEDERAL FUNDS. —** For any fiscal year beginning after September 30, 2007, State expenditures of non- Federal funds for foster care maintenance payments shall not be considered to be expenditures under the State plan developed under this subpart for the fiscal year to the extent that the total of such expenditures for the fiscal year exceeds the total of such expenditures under the State plan developed under this subpart for fiscal year 2005.

Texas expended \$8,373,909 non-federal funds for foster care maintenance payments in fiscal year 2005 as required 25% match for title IV-B, subpart 1. For fiscal year 2021, the state certifies that \$8,373,909 of non-federal funds (state general revenue) was expended on foster care maintenance payments per this limitation.

## **XI. Financial Information**

### **B. Payment Limitations – Title IV-B, Subpart 2**

**For the purpose of applying for FY 2024 funds, States must indicate specific percentages of title IV-B, subpart 2 funds that the State will expend on actual delivery of family preservation, community-based family support, time-limited family reunification and adoption promotion and support services, as well as planning and service coordination, with a rationale for each service category whose percentage of funds does not approximate 20%. The State must have an especially strong rationale if the percentage provided is below 20 percent for any one of the four service categories and must include such rationale in the narrative of the APSR. The amount allocated to each of the service categories should only include funds for service delivery. States should report separately the amount to be allocated to planning and service coordination.**

The Adoption and Safe Families Act of 1997, P.L. 105-89, modified the grant allocation requirements for the Child and Family Services Plans for states. The federal legislation acknowledged the importance of services to prevent child abuse and neglect and assist families in crisis, be they birth, foster or adoptive families, by re-authorizing for three years the Family Preservation and Support Services Program (newly named the Promoting Safe and Stable Families Program) and expanding the uses of the grant to adoption promotion and support services.

Title IV-B is amended regarding family preservation services to eliminate the requirement of only allowing community-based family support services and also allowing time limited family reunification services and adoption promotion and support services. Time-limited family reunification services are allowed during the first fifteen months a child enters foster care and are to be used to facilitate reunification. Adoption promotion and support services may include activities designed to facilitate the adoption process including pre and post adoption services to support permanency for children needing adoptive placements.

Planned allocations for the services categories are:

- Family preservation – 20.8 percent;
- Family support services – 20.5 percent;
- Family re-unification – 27.7 percent; and
- Adoption promotion/support – 27.8 percent.

Each fiscal year, adjustments may be necessary to meet the needs of the children and families served but are planned to remain within the required percentages.

**Provide the estimated and actual amounts of FY 2021 Federal funds expended under title IV-B, subpart 1; for each of the four categories of services in FY 2021 for title IV- B, subpart 2; and for those costs identified as administrative in title IV-**

**B programs. Utilizing the CFS-101-Part III: Annual Expenditures for Title IV-B, Subparts 1 & 2 Funds, Chafee Foster Care Independence Program (CFCIP) and Education and Training Vouchers (ETV), the State must compare FY 2021 estimated expenditures with FY 2021 actual expenditures in each category for the title IV-B programs and, at State option, the CFCIP and ETV program (Attachment C). Provide an explanation for any differences between the FY 2021 estimated costs and actual expenditures in the APSR.**

The estimated and actual expenditures of fiscal year 2021 federal funds expended under title IV-B, subpart 1 were \$27,851,373. The estimated expenditures for fiscal year 2021 for Family Preservation Services were \$7,933,644 and the actual expenditures were \$8,422,940. The estimated expenditures for fiscal year 2021 for Family Support Services were \$7,562,019 and actual expenditures were \$7,265,212. The estimated expenditures for fiscal year 2021 for Time- Limited Family Reunification Services were \$7,688,875 and actual expenditures were \$7,668,046. The estimated expenditures for fiscal year 2021 for Adoption Promotion and Support Services were \$8,036,998 and actual expenditures were \$8,665,955.

**Provide State and local share expenditure amounts for title IV-B, subpart 2 programs for FY 2021 for comparison with the 1992 base year amount as required to meet the non-supplantation requirements in Section 432(a)(7)(A) of the Act.**

In compliance with the non-supplantation requirement, the Department expends \$4,284,053 Title IV-B, subpart 1, Child Welfare Services, federal funds to support family preservation/reunification direct delivery staff and family preservation contracted purchased client services (including concrete services). This funding level maintains the FFY 1992 baseline level of effort for the State of Texas.

The Texas Department of Family and Protective Services (DFPS) contracts with a variety of vendors. Current procurement opportunities are posted on:

- The Health and Human Services Open Enrollment Opportunities page at: <https://apps.hhs.texas.gov/pcs/openenrollment.cfm>External Link
- The Electronic State Business Daily (ESBD) page at: <http://www.txsmartbuy.com/sp>External Link.

## **XI. Financial Information**

### **C. FFY 2021 Title IV-B Expenditure Report- CFS-101, Part III**

**Provide actual expenditures of Chafee allocated funds for FY 2021 (final) and FY 2022 (year-to-date). Identify the amount of Chafee funds used to provide room and board for youth ages 18-21 in the last fully reportable year - FY 2021 (CFS-101, Part III at Attachment C).**

Actual expenditures of Chafee allocated funds for fiscal year 2021 was \$9,279,644 and actual expenditures of Chafee allocated funds for fiscal year 2022 (year-to-date) is \$6,888,610. \$201,720 of Chafee funds were used to provide room and board for youth ages 18-21 in fiscal year 2021. \$198,175 of Chafee funds were used to provide room and board for youth ages 18-21 in fiscal year 2022 (year-to-date).

**Provide actual expenditures of ETV allocated funds for FY 2021 (see CFS-101, Part III at Attachment C) and FY 2022 (year-to-date).**

The actual expenditure of ETV allocated funds is as follows:

Fiscal year 2021 - \$1,955,008

Fiscal year 2022 - \$1,339,695 (to date)

Education and Training Voucher (ETV) numbers are provided by the Contractor. Tuition waiver numbers are reported by the Texas Higher Education Coordinating Board. Tuition waiver numbers are received near the end of February.